

DEPARTMENT OF PUBLIC WORKS  
CITY OF HIALEAH, FLORIDA



# DEPOSIT FORM

Office: 305-556-3800 – Fax: 305-826-5039

CUSTOMER NO: \_\_\_\_\_ REF. NO.: \_\_\_\_\_ CREDIT SCORE: \_\_\_\_\_

CUSTOMER NAME: \_\_\_\_\_  
(NOMBRE DEL CLIENTE)

SERVICE ADDRESS: \_\_\_\_\_  
(DIRECCION DE SERVICIO)

SERVICE DATE: \_\_\_\_\_  
(FECHA DE SERVICIO)

FORWARDING ADDRESS: \_\_\_\_\_  
(DIRECCION PARA CORRESPONDENCIA)

DRIVER LICENSE NO.: \_\_\_\_\_ SOCIAL SECURITY NO.: \_\_\_\_\_  
(NUMERO DE LA LICENCIA) (SEGURO SOCIAL)

HOME TELEPHONE: \_\_\_\_\_ WORK: \_\_\_\_\_ CELLULAR: \_\_\_\_\_  
(NUMERO DE TELEFONO DE LA CASA) (TRABAJO) (CELULAR)

PREVIOUS ADDRESS: \_\_\_\_\_  
(ULTIMA DIRECCION)

CUSTOMER & OWNER ARE SAME: YES ( ) NO ( ) OWNER'S PHONE NO.: \_\_\_\_\_  
(EL DUENO Y EL CLIENTE SON LOS MISMO) SI NO (TELEFONO DEL DUENO)

CUSTOMER EMAIL ADDRESS: \_\_\_\_\_ @ \_\_\_\_\_

CUSTOMER'S SIGNATURE: \_\_\_\_\_ DATE: \_\_\_\_\_  
(FIRMA DEL CLIENTE) (FECHA)

*By signing, you agree to comply to the rules and regulations set by Ordinance No. 05-57, Chapter 94 entitled "Water and Sewers" of the Code of Ordinances of the City of Hialeah, Florida.*

*Al firmar, usted esta aceptando cumplir las reglas y las regulaciones establecidas por las ordenanza No. 05-57, Capitulo 94, titulada "agua y alcantarillado" del codigo de ordenanzas de la ciudad de Hialeah, en la Florida.*

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GUARANTOR'S NAME: \_\_\_\_\_ ADDRESS: \_\_\_\_\_

HOME TELEPHONE: \_\_\_\_\_ WORK: \_\_\_\_\_ CELLULAR: \_\_\_\_\_  
(NUMERO DE TELEFONO DE LA CASA) (TRABAJO) (CELULAR)

DRIVER'S LICENCE NO.: \_\_\_\_\_ SOCIAL SECURITY NO.: \_\_\_\_\_  
(NUMERO DE LICENCIA) (SEGURO SOCIAL)

GUARANTOR'S SIGNATURE \_\_\_\_\_ DATE: \_\_\_\_\_

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**FOR OFFICE USE ONLY**

DEPOSIT NO: \_\_\_\_\_ DEPOSIT AMOUNT: \$ \_\_\_\_\_

LEASE: ( ) DATE: \_\_\_\_\_ SETTL STMT/DEED/QUIT CLAIM DEED: ( ) DATE: \_\_\_\_\_

NOTARIZED LETTER: ( ) DATE: \_\_\_\_\_ OWNER PRESENT W/TENANT: DATE: \_\_\_\_\_

DATE: \_\_\_\_\_ CUSTOMER SERVICE REPRESENTATIVE: \_\_\_\_\_