

**SECURITY DEPOSIT CHANGE  
CITY OF NORTH MYRTLE BEACH**

\_\_\_\_\_ COMMERCIAL  
\_\_\_\_\_ RESIDENTAL

1018 2<sup>ND</sup> AVENUE SOUTH  
NORTH MYRTLE BEACH, S.C. 29598  
843-280-5550 / 843-280-5553 [fax]

“ I hereby apply to the City of North Myrtle Beach for Water and/or Sewer Service in accordance with all Ordinances, Regulations and Rate Schedules now or hereafter in effect. I agree to be individually liable for all charges accruing for this service without notice or demand. I hereby waive any claim against the City arising out of interruption of service for any reason, with or without notice.”

THANK YOU FOR YOUR COOPERATION

\_\_\_\_\_ CUSTOMER SIGNATURE

\_\_\_\_\_ DATE

**NEW ACCOUNT**

**NEW TENANT**

**TRANSFER OF OWNERSHIP**

A SECURITY DEPOSIT IS REQUIRED FOR EVERY ACCOUNT. PLEASE MAKE CHECK PAYABLE TO CITY OF NORTH MYRTLE BEACH.

**GENERAL**

ACCOUNT NO  
CUSTOMER NAME

BILLING ADDRESS

CITY, STATE & ZIP CODE

SERVICE LOCATION

PHONE NO

**CUT ON:**

DATE REQUESTED \_\_\_\_\_

DATE MADE \_\_\_\_\_

**CONSTRUCTION METER**

**OWNER:**

NAME \_\_\_\_\_

ADDRESS \_\_\_\_\_

PHONE NO \_\_\_\_\_

**FORMER OWNER**

NAME \_\_\_\_\_

ADDRESS \_\_\_\_\_

**TRANSFER DEPOSIT \$** \_\_\_\_\_

A TRANSFER OF DEPOSIT BETWEEN ACCOUNTS IS PERMITTED IF SERVICE AT THE OLD ADDRESS WILL BE TERMINATED WITHIN ONE WEEK FROM CUT-ON AT THE NEW LOCATION. IF CONCURRENT SERVICE IS NEEDED FOR LONGER THAN A WEEK, A SEPARATE ACCOUNT WITH A SEPARATE DEPOSIT MUST BE ESTABLISHED FOR THE NEW ADDRESS. A TRANSFER OF DEPOSIT BETWEEN CUSTOMERS IS NOT PERMITTED UNLESS PARTIES NOTIFY THE CITY IN WRITING.

**DEPOSIT:** \_\_\_\_\_

**TOTAL AMOUNT DUE:** \_\_\_\_\_