

Instructions for Completing Application for Merge & Split Change of Existing Commercial Service

General Instructions: Careful attention to providing the required application information expedites the **FLORIDA GOVERNMENTAL UTILITY AUTHORITY (FGUA)** review process and enables it to respond within a **10-working day time frame**. Furthermore, the information provided by applicants is needed to calculate and notify them of impact and connection fees due.

INCOMPLETE APPLICATIONS COULD DELAY FGUA RESPONSE TIME

Upon completion of this application please return to the local customer service office for further processing:

Pasco County Systems

6915 Perrine Ranch Road
New Port Richey, FL 34655
Ph: 727-372-0115
Fax: 727-372-2677

Lehigh Acres and North Fort Myers (Lee County)

9841 Bernwood Place Drive, Unit 120
Fort Myers, FL 33966
Ph: 239-368-1615
Fax: 239-368-7486

Ph: 239-543-1005
Fax: 239-543-2226

Former Aqua Systems

**(Alachua, Putnam, Marion,
Lake, Volusia, Seminole, Orange
Polk and Citrus Counties)**

510 Hwy 466
Lady Lake, FL 32159
Ph: (877) 657-8889
Fax: 352-633-9183



FLORIDA GOVERNMENTAL UTILITY AUTHORITY

Application for Merge/Split and Change of Existing (Commercial) Service Connection (FORM D)

This application is for a **Merge** **Split** (select one) connection(s).

1. Name and address of **property owner** or **property lessee** for which meter Merge/Split is requested:

a. NAME and COMPANY NAME (if applicable):

b. MAILING ADDRESS (including City, State and ZIP):

c. PHONE NUMBER AND/OR EMAIL ADDRESS:

2. Business name

a. Previous Business(es) (include all business names affected by merge/split)

1. _____ 2. _____

3. _____ 4. _____

b. Proposed New Business

1. _____ 2. _____

3. _____ 4. _____

Incomplete
Applications
Will Not Be
Processed

3. Type of facility (restaurant, office, etc.)

a. Previous Business(es) (include all business types affected by merge/split)

1. _____ 2. _____

3. _____ 4. _____

b. Proposed New Business

1. _____ 2. _____

3. _____ 4. _____

4. Estimated average daily flows on annual basis

a. Water: _____ GPD

b. Wastewater: _____ GPD

c. Irrigation (Reclaim or Potable water): _____ GPD

5. Estimated date service is required:

6. Property street address and Property ID (Strap No.): (a separate sheet may be attached)

This information can be obtained from the county property appraiser's website

a. PROPERTY ID (STRAP NO.): _____

| | Property Addresses With Unit Numbers To Be Merged/Split | MERGE | SPLIT |
|---|---|---|--|
| | | Indicate which meter will remain in the merge and which meters will be inactive | Indicate which meter currently exists and which meter(s) will be new installations |
| 1 | | | |
| 2 | | | |
| 3 | | | |
| 4 | | | |

The owner understands that if the meters are to be split at a later date the new meter connection charges as applicable at the time of request will be paid.

Signed: _____

Date: _____

Printed Name: _____

Title: _____

Telephone: _____

Email Address: _____

FOR OFFICE USE ONLY

System: Aqua-Lake Aqua-Pasco Aqua-Unified Consolidated Lehigh

Lindrick North Fort Myers Pasco

Sub-System Name (if applicable): _____ County: _____

Services Available:

Water - Meter Size: _____

Wastewater

Potable Water for Irrigation - Meter Size: _____

Reclaimed Water - Meter Size: _____

Fire Protection - Meter Size: _____

I have checked the information provided by the customer in this application and have verified all details within the billing system and find them to be accurate. I have also verified the following attachments have been included:

Current Lease (if applicable)

Property Appraiser Parcel Information Card

Customer Service Representative: _____ Date: _____