



City of Apopka E-Bill Authorization Form

Utility Billing Division
150 E. 5th Street, Apopka, FL 32703
Phone: 407-703-1727 Fax: 407-703-1630
Website: www.apopka.net

Submission Date: _____

Application:

This authorization form updates how utility billing statements are delivered each month. Customers will no longer receive monthly statements by mail, but through the email address indicated on this form.

Applicant Information:

Account Number: _____

Applicant Name: _____

Address: _____

City: _____

State: _____ Zip: _____

Work Phone: _____ Home Phone: _____

Email: _____

I confirm my subscription to the City of Apopka's weekly email newsletter. Yes ____ No ____

(The Apopka Proud Newsletter is delivered weekly via email. Customers can unsubscribe at any time on our website.)

Release Information:

By submitting this form, I hereby agree to no longer receive a monthly bill statement via the US Postal Service. I will receive a notification by e-mail that a new bill has been created and is available for viewing.

If my e-mail address changes, it will be my responsibility to notify the City of Apopka Utility Billing Division of the change so I can continue to receive notifications. This will remain in effect until I notify the City of Apopka Utility Billing Division to discontinue.

All other policies, collections, penalties or fees of the City of Apopka will remain the same as if a paper bill had been mailed. E-mail addresses are public records under Florida law and are not exempt from public-records requirements.