



CERTIFICATION OF SERVICE DISCONNECT

Date:				
Applicant:				
<input type="checkbox"/>	Contractor:			Phone:
<input type="checkbox"/>	Owner:			Phone:
Address:		City:	State:	Zip

Building Structure is:			
	<input type="checkbox"/> Residential	<input type="checkbox"/> Commercial	
Job Address:			
Legal Description:			
Owner of Record:			
Address:		City:	State: Zip

Duke Energy
bsuccst@duke-energy.com

City Water Utilities Department
ewatson@apopka.net

Date of Disconnect:

Date of Disconnect:

Lake Apopka Natural Gas
Jskipper@langd.org

City Engineering Department
jdavoll@apopka.net

Date of Disconnect:

Date of Disconnect:

All work must be completed within 30 days. Demolition permits are time sensitive.

INSPECTIONS ARE REQUIRED AFTER DEMOLITION HAS BEEN COMPLETED.