



**CITY OF APOPKA  
Building Division**

**407-703-1713 Phone -- 407-703-1791 Fax -- 407-703-1815 Automated Inspection Line**

**CERTIFICATION OF SERVICE DISCONNECT**

Date:

Applicant:

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

Building Structure is:  Residential  Commercial

Job Address:

Legal Description:

Owner of Record:

Address:	City:	State:	Zip
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Duke Energy  
[bsuccst@duke-energy.com](mailto:bsuccst@duke-energy.com)

City Water Utilities Department  
[ewatson@apopka.net](mailto:ewatson@apopka.net)

Date of Disconnect:

Date of Disconnect:

Lake Apopka Natural Gas  
[Jskipper@langd.org](mailto:Jskipper@langd.org)

Building Staff

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.**