

Permit No. _____

City of Burlingame Commercial Utility Abatement Application

Date of Application: _____

Name of applicant: _____

Name of business: _____

Address of business: _____

Phone Number: _____

Utility Acct. No. _____

Signature of applicant: _____

Received by: _____

Date: _____

-
- | | |
|--|---|
| <input type="checkbox"/> New business/new location | <input type="checkbox"/> Inside City Limits |
| <input type="checkbox"/> Commercial zoning dist. | <input type="checkbox"/> Utility agreement |

Approved by: _____

Date: _____