



Name Change or Additional Name On Current Utility Account

Date _____ Account Number _____

Address _____

Current Name(s) On The Account _____

If name changes from one person to another, please complete this section:

_____ Any deposit on this account will be forfeited at the time of the account closure, and will be refunded to the person whose name appears on the account.

New Name to Appear on Account _____
(PLEASE PRINT)

If resident is adding a name to the account, please complete this section:

New Name to Appear on Account _____
(PLEASE PRINT)

Signature of Current Account Holder _____

Date _____

Signature of New Account Holder or Newly Added Person _____

Date _____

*****OFFICE USE ONLY*****

Account Update By _____

Date _____