



ACCOUNT #

UTILITY ACCOUNT UPDATE REQUEST

Primary Name on Account: _____

Service Address: _____

CHECK THE FOLLOWING THAT NEEDS TO BE UPDATED:

Mailing Address: _____

Home Phone: _____

Cell Phone: _____

Add a Secondary Name to Account:

Name: _____

Driver's License: _____

Last 4 digits of Social: _____

Signature of Secondary #2: _____

WRITE IN ALL OTHER CHANGE REQUESTS:

Empty box for additional change requests.

A resident may request that their address and telephone number be kept confidential. If a resident makes such a request of confidentiality, the City shall keep the address and telephone number confidential unless required or mandated by law.

YES - Request for confidentiality NO - Do not request confidentiality

Signature of Primary: _____ Date: _____

FOR CITY USE ONLY

Employee Signature: _____ Date: _____