

WATER AND WASTEWATER ENTERPRISE

## CUSTOMER CHANGE FORM

Change of Utility Service	
Mailing Address Name	
Please Note: A Renter Agreement must be completed to have bills mailed to anyone other	
than the property owner(s).	
Account Number(s):	
Property Owner Name:	
Service Address:	
New Mailing Address:	
Primary Phone Number:	
Secondary Phone Number:	
Account Type: Residential Commercial	
Type of service: Water Both Water & W	<sup>7</sup> astewater
Signature:	
Date:	
For City Use:	
Entered By:Billing Personnel	Date
	622 FAX: 719-539-5271 itilities@cityofsalida.com