



NEW/CHANGE WATER SERVICE

Former Owners Name, Address, Ph#: _____

New/Current Owners Name, Address, Ph#: _____

Service Address: _____

Water Account Number: _____

Renters Name/Billing Address/Ph#: _____

Effective Date of Change: _____

**** FOR NEW WATER INSTALLATION ****

Type of Building to Service: _____

Date Work Will Begin: _____

Date Work Completed: _____

Former Owner Signature & Date

New/Current Owner Signature & Date

Renter Signature & Date

Briley Township Representative