

SEWER/WATER NAME CHANGE REQUEST FORM

Please use this form for newly purchased property or mailing address updates

Submit it to:

Thetford Township
ATTN: Sewer Dept.
4014 E Vienna Road
Clio, MI 48420
Fax: (810) 686-9394

PROPERTY INFORMATION/SERVICE ADDRESS:

ACCOUNT NUMBER: _____

STREET ADDRESS: _____

PURCHASE DATE: _____

Please note: You MUST BE the owner of the property in order to have the account placed into your name. We will not put a renter's name on the account.

OWNER'S CONTACT INFORMATION:

-----Please print clearly-----

OWNER'S NAME: _____
First Last

SECOND NAME or BUSINESS NAME: _____

MAILING ADDRESS: _____

CITY: _____ STATE: _____ ZIP: _____

I affirm I am the owner of the above property and understand that Thetford Township will deliver water and/or sewer bills to the Service (property) Address shown above – unless another mailing address is stated above. I acknowledge responsibility for ensuring charges issued against the property must be paid in full by the due date listed or interest charges will be imposed. Billing cycles for Sewer are quarterly – bills are sent out in the months of March, June, September and December.

Signature of Owner

Date

Signature of Second Owner

Date

----- TO BE COMPLETED BY TOWNSHIP

Verified Sewer Changes: _____ Property Transfer on File: _____

Completed by: _____ Date: _____