

Authorization to Change Information on Utility Account

Account #:	Name on account:
Driver's License #:	SS #:
E-mail address:	Phone #:
Service Address:	

I hereby authorize the City of Waller, Texas, to make the changes marked below:

□ Authorization to Change Mailing Address					
Old Address:	City_	State	Zip Code _		
New Address:	City	State _	Zip Code _		
☐ Authorization to Change Utility Acct/Deposit Name					
New name to be displayed on the account					
Reason for name change Marriage Divorce Legally changed name Other					
☐ Authorization to Add Account Holder					
(This requires an ID or DL, and both parties must be present)					
I hereby request and authorize the City of Waller to add					
to my utility account as an account holder.					
I hereby understand by being added to the account I am now equally financially responsible					
for the balance on the account.					
Driver's License/ID #		SS #			
Phone #	Relations	hip to Custome	r		
(Customer Signature)	— ————————————————————————————————————	count Holder's S	Signature)	(Date)	