

TO: THE TOWNSHIP OF WOOLWICH
ATTENTION: WATER & SEWER BILLING
P.O. BOX 158
ELMIRA, ON N3B 2Z6

FAX: 519-669-9348 E-MAIL: Woolwich.mail@woolwich.ca

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WATER & SEWER SERVICE – NOTICE OF CHANGE OF TENANCY

TO BE COMPLETED BY OWNER

OWNER: _____ DATE: _____

SERVICE ADDRESS: _____

ACCOUNT # : _____ or CURRENT TENANT: _____

TO BE COMPLETED BY TENANT

I / We the undersigned will be assuming responsibility for payment of the water and sewer service at the above noted address, and request the account be changed to the name(s) of:

Primary acct holder: _____
Please print name

Driver's Licence #: _____ / or S.I.N.: _____

Primary acct holder: _____
Signature

Second acct holder: _____
(If applicable) Please print name

Driver's Licence #: _____ / or S.I.N.: _____

Second acct holder: _____
Signature

Effective Date: _____, 20____