



**WATER DEPARTMENT
VILLAGE OF MONROE**
www.villageofmonroe.org

WATER ACCOUNT NAME CHANGE FORM

DATE: _____

Applicant is: Owner Renter

Please PRINT CLEARLY:

Account Number: _____ **Section, Block & Lot:** _____
Property Address & Zip Code: _____

New Owner / Renter: _____

Phone Number: _____

Email Address: _____

New Owner's Billing Address:

(Complete ONLY IF FUTURE billing address differs from property address)

Previous Owner / Renter: _____

Phone Number: _____

**Please fax form back to Village of Monroe: Water Department at (845) 782-3006 OR email
billingcontrolclerk@villageofmonroe.org.**

**Please call (845) 782-8341 Ext. 122 or email billingcontrolclerk@villageofmonroe.org with
any questions.**

For Office Use Only:

Updated by: _____

Date Updated: _____