



249 N MILLER SAGINAW, MI 48609
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EMAIL: WATERSEWER@THOMASTWP.ORG

NEW OWNER UTILITY BILLING TRANSFER AUTHORIZATION

NEW PROPERTY OWNER: _____

PROPERTY ADDRESS: _____
(ADDRESS) (CITY, STATE & ZIP)

MAILING ADDRESS (IF DIFFERENT FROM PROPERTY ADDRESS):

(ADDRESS) (CITY, STATE & ZIP)

PHONE: _____

EMAIL: _____

PAPERLESS BILLING: YES NO

ASSUME RESPONSIBILITY FOR UTILITIES AS OF: _____
(DATE)

I UNDERSTAND THAT AS THE PROPERTY OWNER I AM ULTIMATELY RESPONSIBLE FOR ALL UTILITY PAYMENTS INCLUDING ANY CURRENT BALANCES. ALL ACCOUNTS NEED TO BE CURRENT FOR CONTINUED SERVICE.

OWNER SIGNATURE

DATE

NEW TO THOMAS TWP? YES NO

PLEASE RETURN THIS FORM WITH A COPY OF YOUR PHOTO I.D.

We offer "Direct Debit" as a payment option. Please see our *Utility Billing* department for more information