

## **Account Status Change Request**

Account Details and Requested Change				
Service Location			UB Account #	
			Billing Cycle	
Requested Change			Effective Date	
Requested By				
Tenant Information (if a	pplicable)			
Tenant(s) Name (1)		Nai	me (2)	
Phone				
Management Information	on (if applicable)			
Management Name	-		Cust. N	0
Billing Address				
City		State	Zip Code	
Phone	-	Email		
Owner Information				
First and Last Name			Cust. N	0
Mailing Address				
Phone		Email		
By my signature below, or electronic acknowledgement via email:  I, the owner or authorized manager, of the above referenced service location verify I have requested the above changes and undersated the fees associated with these changes as listed below (with certain size and price variations as outlined in Ord. 2017-40 and 2017-53).  I further understand that if I, the owner or authorized manager of subject service location, choose to turn the water on/off myself I am wholly responsible for				
	er or any part of the City property.	or subject service location, choos	e to turn the water on/on n	rysell I alli wilding responsible for
Signature		Date		
Water turned on/off by owner or authorized manager?			YES NO	_
Water:	turn off/on - regular hours	\$22.50 per o		
Sanitation:	90 gallon removal/add	\$16.10 per o	occurance Form Comp	pieted by:
Green waste:	90 gallon removal/add	\$16.10 per o	occurance	

\*For new tenant or manager: an Owner/Tenant or Owner/Management form must be completed and the account balance must be paid to \$0.00. Please contact Customer Service for additional assistance.\*