



City of Watford City

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Utility Account Move

In Out

| Contact Date: | Current Balance \$ |
|---|---------------------------------------|
| Effective Date: | ☐ Final Bill Next Month |
| Account Information | ☐ Transfer ACH from Acct # |
| Utility Account #: | |
| Service Address: | |
| Resident Information | |
| Resident Name: | |
| Resident Mailing Address: | |
| Resident Phone Number: Cell Phone: | |
| Resident Email Address: | |
| Owner Information New Owner Closing Date// Confirmed w/ County | |
| Property Owner Name: | |
| Owner Mailing Address: | |
| Owner Phone Number: Cell Phone: | |
| Owner Email Address: | |
| Property Management (if applicable) New Management | |
| Property Manager: | |
| Property Manager Mailing Address: | |
| | Phono: |
| Phone Number: Cell Phone: | |
| FOR OFFICE USE | |
| | nge Rate ential: Tote(S) Dumpster |
| | nercial: Tote 300 gal Dumpster Shared |
| | Code Change To: |
| Meter Reading: Garba | ge Service Order #: |
| Prorated Days | |
| \$35 New Account Fee Date Entered, UE | 3: Scanned: Intl: |