

THE CITY OF FLIN FLON CHANGES TO ACCOUNTS

NOTE: PLEASE ADVISE ANY APPLICANT **IF** THERE IS ANY OUSTANDING BALANCE ON THEIR WATER ACCOUNT **PRIOR** TO MAKING ANY NAME CHANGES!!

WATER ACCOUNTS SHOULD BE PAID IN FULL PRIOR TO A CHANGE.

Water Acct. #: _____

Tax Acct. #: _____

Accts. Receivable #: _____

CURRENT NAME: _____

NAME CHANGE TO: _____

SERVICE ADDRESS: _____

MAILING ADDRESS CHANGE TO: _____

POSTAL CODE: _____

TELEPHONE # & (Area Code): _____

NAME OF RENTER (IF APPLICABLE): _____

REASON: _____

EFFECTIVE DATE

ACCOUNT STATUS

DATE SIGNED

APPLICANT'S SIGNATURE

OFFICE USE ONLY

DATE CHANGED IN SYSTEM

CHANGE MADE BY