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AUTHORIZATION FOR UTILITY BILLING
MAILING ADDRESS CHANGE

PLEASE PRINT

I, _____, AM THE OWNER OF

PROPERTY LOCATED AT _____
(ADDRESS) (CITY/STATE/ZIP)

PLEASE MAIL UTILITY BILLS FOR THE ABOVE PROPERTY TO THE FOLLOWING ADDRESS:

(ADDRESS) (CITY) (STATE) (ZIP CODE)

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

OWNER'S SIGNATURE
Please return with a photo copy of your I.D.

PHONE NUMBER

DATE