

CITY OF KING
229 South Main Street
King, NC 27021
336-983-1100 Customer Service
336-924-8363 Emergency Nights and Weekends

Water / Sewer Service Account Change Form

Please complete the ORIGINAL box and then note only the items you wish to change in the CHANGES box.
Please sign and date at the bottom.

| | |
|--|--------------------|
| ORIGINAL | |
| Name _____ | |
| Service Address _____ | |
| Mailing Address _____ | |
| Home Phone # _____ | Work Phone # _____ |
| Wireless Phone # _____ | Email _____ |
| <small><i>When you provide us with a wireless telephone number or land line number you are giving us your prior express consent to call that number in order for us to service your account or to collect any amounts you may owe. We may also contact you by sending text messages or emails, using any email address you provide us. Methods of contact may include using pre-recorded or artificial voice messages and/or the use of an automatic dialing device as applicable.</i></small> | |

| | |
|--|--------------------|
| CHANGES | |
| Name _____ | |
| Service Address _____ | |
| Mailing Address _____ | |
| Home Phone # _____ | Work Phone # _____ |
| Wireless Phone # _____ | Email _____ |
| Add Yard Cart fees to utility bill: _____ | |
| <small><i>When you provide us with a wireless telephone number or land line number you are giving us your prior express consent to call that number in order for us to service your account or to collect any amounts you may owe. We may also contact you by sending text messages or emails, using any email address you provide us. Methods of contact may include using pre-recorded or artificial voice</i></small> | |

Applicant Signature

Print Name

Date

**Please provide a date for disconnection. _____

| | |
|----------------------------|-------------------|
| <i>FOR OFFICE USE ONLY</i> | |
| Date Entered _____ | Received by _____ |