



WATERTOWN WATER DEPARTMENT

800 HOFFMANN DRIVE, P.O. BOX 477
WATERTOWN, WI 53094
TELEPHONE (920) 262-4075
FAX NO. (920) 262-4087

Property Owners: Please provide this completed form to the Watertown Water Department office at least 48 hours prior to the requested date to be changed, by:

- **FAX** to (920) 262-4087
- **E-mail** to wtnwater@ci.watertown.wi.us
- **Mail** to P.O. Box 477, Watertown WI 53094-0477
- **Drop off** at Water Dept. office, 800 Hoffmann Dr., or at City Hall, 106 Jones St.

CHANGE OF TENANT REQUEST FORM **REMOVAL OF OLD TENANT(S) NAME**

DATE: _____

PROPERTY ADDRESS: _____

DATE TO BE CHANGED: (Monday-Friday only) _____

OWNER INFORMATION:

Name: _____

Address: _____

Phone Number: _____

OLD TENANT INFORMATION:

Name: _____

Forwarding Address: _____

Phone Number: _____

PLEASE READ:

This is to authorize the Watertown Water Department to change the bill into the name of the property owner listed above as of the "date to be read". The bill will not be changed into a new tenant(s) name until we receive a *Change of Tenant Request Form, Addition of New Tenant Name*, signed by the new tenant.

SIGNATURE OF PROPERTY OWNER:

REQUESTS MUST BE MADE 48 HOURS IN ADVANCE

METER READINGS and TENANT NAME CHANGES WILL NOT BE DONE ON SATURDAYS, SUNDAYS OR HOLIDAYS.