



BIGHORN-DESERT VIEW WATER AGENCY
CHANGE OF ADDRESS FORM

Please use this form to change your mailing address on your account.

Kindly print the requested information, sign on the required "Signature" line, and return this completed form to the Agency (address provided below). **Thank you!**

Name(s) on Account	
Account Number(s)	
New Street Address, City, State, Zip	
Previous Street Address, City, State, Zip	
Current Home Phone	Current Work Phone

PLEASE READ: I hereby authorize the above change of address for any billing and/or communication relating to my Bighorn-Desert View Water Agency account(s). I understand that the agency will not be responsible for errors or delays resulting from inaccurate or incomplete information provided on this form and release them from all liability whatsoever for any actions taken with implementing this request and authorization.

Signature

Printed Name

Date