COMMISSIONERS MARY JANE MANNELLA GEORGE PASTORINO



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## Utility Bill Change Request

Please note this is not for change of ownership or tenant of property form.

Name on Account: \_\_\_\_\_

Account Number: \_\_\_\_\_

Service Address: \_\_\_\_\_

I would like to make the following changes to my water account: <u>Please check a box below</u>



Name

Mailing Address

Current Name on	
Account:	
Change to:	

Billing Adress Change:	Address			
	City	State	Zip	

Descriptive reason for change:

Signature:	Email:
<b>-</b>	

Date for change to take place: \_\_\_\_\_ Phone Number: \_\_\_\_\_