



Request to change mailing address

Date the address change is required (dd/mmm/yyyy): _____

Please Note: This form must be received at the Region Office at least 72 hours (3 business days) PRIOR to the date on which you require the service. Please have the form completed in full.

If you have any questions or wish to make your application by phone, please call Accounts Receivable at 519-575-4490 (Deaf and Hard of Hearing (TTY): 519-575-4608) during regular office hours, 8:30 a.m. to 4:30 p.m., or fax 519-575-4448 to the attention of Accounts Receivable.

Water and wastewater account number: _____

Legal name(s) of owners of property: _____

Are you the:

Owner

Tenant

Service address: _____

Old mailing address: _____

Home phone: _____

Work phone: _____

Cell: _____

Email: _____

New mailing address: _____

Home phone: _____

Work phone: _____

Cell: _____

Email: _____

Account Holder Signature

Date

Account Holder Signature

Date

Personal information collected is pursuant to the *Municipal Freedom of Information and Protection of Privacy Act*, as amended, under the authority of Part XII of the *Municipal Act*, as amended, and will be used for the purposes of administration of the municipal water and wastewater services. Questions about this collection should be directed to the attention of Accounts Receivable, Regional Municipality of Waterloo, 150 Frederick Street, Kitchener ON N2G 4J3.