

# CUSTOMER MOVING FORM

DATE MOVING: \_\_\_\_\_

NAME: \_\_\_\_\_

ADDRESS: \_\_\_\_\_

ACCT #: \_\_\_\_\_

PHONE #: \_\_\_\_\_

NEW ADDRESS: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

*CUSTOMER SIGNATURE*

*DATE*

\_\_\_\_\_

## OFFICE USE ONLY

DATE TAKEN: \_\_\_\_\_

BY WHOM: \_\_\_\_\_

METER ID: \_\_\_\_\_ RNI \_\_\_\_\_

# POLYCARTS TO PICK UP \_\_\_\_\_

TRASH W/O \_\_\_\_\_ WATER W/O \_\_\_\_\_

ACH \_\_\_\_\_ EBILL TURNED OFF \_\_\_\_\_

NOTES: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_