



ARIZONA WATER COMPANY

Please fill in this form, print, and bring to your local office for processing.
Forms also available by calling or stopping in at your local office.

CUSTOMER ACCOUNT CHANGE REQUEST

I/we hereby agree to assume responsibility for the account listed below under the terms and conditions as approved by the Arizona Corporation Commission and agree to pay for the same at the approved rates.

To remove an account holder, please be prepared to present a death certificate or divorce decree.

To add an additional account holder, a copy of a photo ID for each party and signatures from both parties are required.

Account Number: _____ - _____ - _____ - _____ - _____

Account Name: _____

To Make A Name Change, Fill In Both Remove And Add Sections Of The Form

Remove Account Holder Name:

Add Account Holder Name:

Print Name to Remove from Account

Print Name to Add to Account

Customer Signature

Customer Signature

Date

Date

To Update Billing Address, Please Provide The Old Billing Address And The New Billing Address.

Old Billing Address:

New Billing Address:

Street Address or PO Box Number

Street Address or PO Box Number

City

City

State, ZIP Code

State, ZIP Code