

**Town of Fort Erie
Change of Mailing Address**

TAXES

WATER

I hereby authorize the Town of Fort Erie to change the following information:

Roll # _____ Water Account # _____

Owner's Name: _____

Tenant's Name (Water): c/o _____

Service Address: _____

Mailing Address: Street: _____

City, Province: _____

Postal Code: _____

Set up so owner receives copy of Water Bills

Owner's Address: Street: _____

City, Province: _____

Postal Code: _____

Owner's Telephone #: _____

Notes: _____

Signature: _____

Received By: _____ Date: _____

Processed By: (W) _____ Date: _____

Processed By: (T) _____ Date: _____