



Phone: (307) 783-6300 Fax: (307)783-6390

City of Evanston
1200 Main Street

Customer Account Number: _____ Date: _____

Mail Route: _____ Multiple Accounts: Yes No

Other Account #: _____

Sign up for Paperless Statements or automatic Payments at www.evanstonwy.org

Owner's Name: _____

Service Address: _____

Billing Address: _____

City, State, Zip: _____

Phone (Owner): Home: _____ Cell: _____ Work: _____

Email Address: _____

Deposit: \$ _____ Receipt # _____ Date: _____

Notes: _____

As the Home Owner, I understand that I am responsible for the timely payment of all utility charges, fees, and billings. I will be responsible for all fees and late fees if action must be taken on the delinquent account.

Requested By: _____ Date: _____
Signature _____

IF YOU HAVE AUTO PAY AND YOU MOVE OUT, BE SURE AND SHUT IT OFF AND REMOVE YOUR PERSONAL INFORMATION.

OFFICE USE

<input type="checkbox"/> Name Change	<input type="checkbox"/> Customer Type	<input type="checkbox"/> Deposit Information
<input type="checkbox"/> Address Change	<input type="checkbox"/> Alert Message	<input type="checkbox"/> Send Statement
<input type="checkbox"/> Mail Route	<input type="checkbox"/> Garbage <input type="checkbox"/> Can# <input type="checkbox"/> Day <input type="checkbox"/> Size	<input type="checkbox"/> Code On
<input type="checkbox"/> Phone	<input type="checkbox"/> Sewer Change <input type="checkbox"/> to <input type="checkbox"/>	<input type="checkbox"/> Code Off
<input type="checkbox"/> Collection	<input type="checkbox"/> Pre-Owner/Notes	<input type="checkbox"/> Tap Fees
<input type="checkbox"/> Location	<input type="checkbox"/> Email Address	<input type="checkbox"/> Add New
<input type="checkbox"/> Other _____		

Date Entered: _____ Previous Date: _____

Entered By: _____ Previous Owner: _____