

City of Swartz Creek
(An Equal Opportunity Employer)
Records Change Form

Effective Date _____ Email Address _____

Property Address _____ Property ID _____

FORMER / PRESENT Renter Owner

Printed Name

Signature

Mailing Address

City, State, Zip

Phone

NEW Renter Owner

Printed Name

Signature

Mailing Address

City, State, Zip

Phone

*****The Mailing Address is the address where all future bills and notices will be sent until a new form is filed with the City of Swartz Creek*****

Initials

ACTION TO BE PERFORMED

- Water Turn Off-- \$20.00 Charge
- Water Turn On-- \$20.00 Charge --- Appointment is Required for Turn On
- Final Water Reading—**Final Bill will be sent to Previous owner unless otherwise specified**
- Billing Address Change
- Name Change: Reason for Change _____

Do you claim a PRE for this property?

YES NO

If Yes: Is this a temporary change?

YES NO

Make Changes in:

Utility Billing **(ASK ABOUT PAPERLESS BILLING)**

Taxes }
 Assessing } *Owner Name will not be changed without a Deed*

NOTE: This form is issued under the authority of Section 211.44:9a of the Michigan State Law. Filing of this form allows the City Treasurer and the City Assessor to mail tax and assessment statements to designated agents. This statement may be revoked by the property owner at any time by way of written notice to the City Treasurer or Assessor.

Staff Initials _____

WO # _____

ID Checked: _____

Copies to Assessor and Treasurer

Date _____

Paperless Billing Auth. Received