



**MT. VIEW-EDGEWOOD WATER COMPANY**

**11610 – 32<sup>ND</sup> STREET EAST**

**EDGEWOOD, WA 98372-2099**

*Phone: (253) 863-7348; Fax: (253) 863-0752*

*www.mtvewater.com*

**UPDATE ACCOUNT INFORMATION**

Request for update to account information is hereby made to Mt. View-Edgewood Water Company.

Name(s) of **Legal** Owner: \_\_\_\_\_

Service Address of Property: \_\_\_\_\_

**Requested Changes – Fill Out All That Apply:**

Billing Name: \_\_\_\_\_  
(Name changes only – not for a change in ownership or renters)

Mailing Address: \_\_\_\_\_  
(Address where you would like the bill sent)

If Address Change – Is It \_\_\_Permanent or \_\_\_Seasonal?  
(ck) (ck)

If Seasonal, How Long Should We Use This Seasonal Address For Billing? \_\_\_\_\_

Contact Number(s): \_\_\_\_\_

Email: \_\_\_\_\_ Fax: \_\_\_\_\_

**\*PLEASE STATE REASON FOR ACCOUNT INFORMATION UPDATE:**

\_\_\_\_\_  
\_\_\_\_\_

Print the name of person making request

Signature – By my signature I certify that the above information is true and correct. Date

**\*Please note that we are a membership owned, non-profit water company; each water meter is tied to the parcel; we adhere to the legal name associated with the parcel per the Pierce County Assessor.**

**For Office Use Only:**

Parcel # \_\_\_\_\_ Membership # \_\_\_\_\_

Meter # \_\_\_\_\_ Route # \_\_\_\_\_ Sequence # \_\_\_\_\_ Acct. # \_\_\_\_\_