

**CITY OF TWO HARBORS
UTILITY ACCOUNT CHANGE REQUEST FORM**

Name: _____

Add Additional Name: _____

Mailing Address: _____

Service Address: _____

Account Number: _____ Phone Number: _____

Electric:

__ Read electric meter in on _____ (Date) __ Read electric meter out on _____ (Date)

__ Disconnect electric meter on _____ (Date)

Gas:

__ Read gas meter in on _____ (Date) __ Read gas meter out on _____ (Date)

__ Pin gas meter on _____ (Date)

Water and Sewer:

__ Read water meter in on _____ (Date) __ Read water meter out on _____ (Date)

__ Shut off water on _____ (Date) __ Read sewer meter out on _____ (Date)

Print Name: _____

Signature: _____ Date: _____