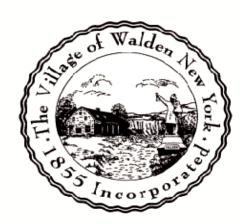
| For Office | Use Only: |
|---------------|-----------|
| Account #: | |
| Date entered: | |



Village of Walden Utility Account Change Form

| Today's Date: | - |
|---|-------|
| Property Address: | |
| New Billing Name: | |
| New Billing Address: (if different from property address) | |
| Owner/Landlord Address: | |
| Contact #: | |
| Date Changes go into effective: | |
| Print & Sign: | |

Fax completed form to: 845-778-2170

Mail or Hand deliver completed form to: 1 Municipal Square Walden, NY 12586

Email completed form to: mtapia@villageofwalden.org

Questions? Call Village Hall 845-778-2177 (Option 4, Finance Department)