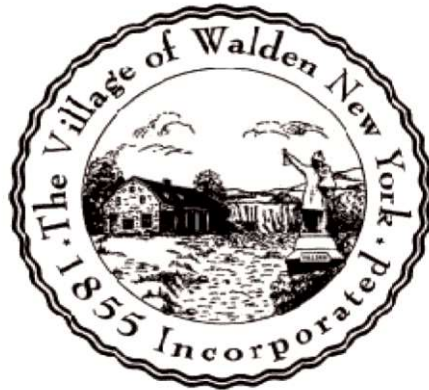


Do NOT use this form if a FINAL READ is needed

For Office Use Only:
Account #: _____
Date entered: _____



Village of Walden Utility Billing Change of Address Form

Today's Date: _____

Property Address: _____

New Billing Name: _____

New Billing Address: _____
(if different from property address)

Owner/Landlord Address: _____

Contact #: _____

Effective Date: _____

Email Address: _____

Print & Sign: _____

Submit Complete Forms via:

Fax: 845-778-2170

Mail or In Person: 1 Municipal Square Walden, NY 12586

Email: mtapia@villageofwalden.org or deputytreasurer2@villageofwalden.org

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