

# Name Change Form



Date: \_\_\_\_\_

(Must be only on one account)

Account Number: \_\_\_\_\_

Address: \_\_\_\_\_

Deposit amount being changed over: \_\_\_\_\_

I, \_\_\_\_\_, agree to release my utility account to \_\_\_\_\_, and give the City of Gonzales permission to change the account to his/her name. I understand that by doing so, I release my rights to the deposit and account history to the person whose name the account is transferring to.

Current Customer	New Customer
Signed: _____ (person whom account is currently under)	Signed: _____ (person whom account is being changed over to)
DL: _____	DL: _____ DOB: _____

Attach copy of Texas ID or DL to this form.

## New Customer Information

Mailing address of account customer (if different from the service address)

\_\_\_\_\_

\_\_\_\_\_

Telephone #: \_\_\_\_\_

## For City Use Only

Approved By: _____	Date: _____
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