

Town of Friday Harbor
PO Box 219 / Friday Harbor, WA 98250
(360) 378-2810 / FAX (360) 378-2380

Change in Utility Services

Account # _____

Service Address: _____

Start Duplicate Bill -or- Stop Duplicate Bill

Tenant Name: _____

Tenant Contact Phone Number: _____

Tenant Mailing Address: _____

I understand that I will receive a duplicate copy of the Owner's bill in my name and that the Owner will receive the original bill as well as any delinquency notice _____.
(Initial)

Change Mailing/Phone

Name: _____

Old Address: _____

New Address: _____

New Phone# _____

Refuse

Name: _____

Phone: _____

Mailing Address: _____

Container Type: _____

Other Information _____

Signature: _____ Date: _____

Owner Signature: _____

Above changes made on account by _____ on _____.