City Of Tuscaloosa
Water Works and Sewer Department

APPLICATION TO TRANSFER SERVICE

Please complete all information below, then print and sign the document. E-mail the application and required documentation* to ubcontact@tuscaloosa.com. You will then be contacted by a Service Representative concerning service connection.

Customer Name (as it is & will be shown on account): _____

Last 4 digits of Customer SS#: _____

Current Service Address: _____

New Service Address: _____

Mailing Address (for billing purposes): _____

_____

Contact Phone Number: _____

Requested Transfer Date: _____

*REQUIRED DOCUMENTATION TO INCLUDE WITH THE APPLICATION:

1. Copy of the Customer's driver's license.
2. Copy of the Customer's lease or home ownership papers showing date of occupancy at the New Service Address.

PLEASE READ AND ACCEPT BY SIGNING BELOW: I hereby accept full responsibility for this account, and am aware that I am fully responsible for any amounts due on said account effective this date and until such time as I close the account or until the account is transferred to another individual.

Name (please print): _____

Signature: _____

Date: _____

WITNESS

Name (please print): _____

Signature: _____

We look forward to serving you!

P.O. Box 2090, Tuscaloosa, AL 35403
Phone: (205) 248-5500
Fax (205) 349-0237
E-Mail: ubcontact@tuscaloosa.com