NAME CHANGE

request that Pace Water System chan at the following	ge the billing name and depos ing address:	it on account number
Street		
City		
I agree to assume all MATURED AND present subscriber to the above mention	UNMATURED charges with ed account.	out limitation for the
Present Customer: (Print)		Date:
Social Security #:	Driver's License #	
Signature Present Customer		
Signature Witness/Notary		
The current subscriber hereby agrees to tabove named address and account number	the reassignment of water and	L'or sewer service to the
New Customer: (Print)		Date:
Social Security #:	Driver's License #	
Signature of New Customer		
Signature Witness/Notary		
	Date Received	
	Date Changed	