



CHANGE OF ADDRESS / EMAIL NOTIFICATION FORM

City of Edgewater – Utility Billing Department

PO Box 1190

Edgewater, FL 32132-1190

(386) 424-2400 fax (386) 424-2409

Account Number: _____ - _____

Date: _____ / _____

Property Address: _____

I, _____ realize that I am responsible for the timely payment of the utility bill for the above location. However, effective _____ please mail the utility bill to:

C/O Tenant? Y / N (**circle one**)

If you would like to receive **E-Notification** of the utility bill, please provide us with your email address (**owner only**)

Email address:

Telephone No. (_____) _____

Signature: _____

Identification(DL#)

Owner / Property Manager (**circle one**)