

City of Swartz Creek

Records Change Form

Ph: (810) 635-4464 Fax: (810)635-2887

Effective Date _____ Property ID _____

Property Address _____

FORMER / PRESENT Renter Owner

Printed Name

Signature

Mailing Address

City, State, Zip

Phone

NEW Renter Owner

Printed Name

Signature

Mailing Address

City, State, Zip

Phone

*****The Mailing Address is the address where all future bills and notices will be sent until a new form is filed with the City of Swartz Creek*****

Initials

ACTION TO BE PERFORMED

- Water Turn Off-- \$20.00 Charge
- Water Turn On-- \$20.00 Charge --- Appointment is Required for Turn On
- Final Water Reading—Final Bill will be sent to Previous owner unless otherwise specified
- Billing Address Change
Reason for Address Change: _____

Do you claim a PRE for this property?

YES NO

If Yes: Is this a temporary change?

YES NO

Make Changes in:

Utility Billing

Taxes

Assessing

Owner Name will not be changed without a Deed

*****PLEASE CHECK WITH THE CITY OFFICES TO SEE IF THERE ARE DELINQUENT QUALIFIED REAL TAXES OWED ON THIS PROPERTY*****

NOTE: This form is issued under the authority of Section 211.44:9a of the Michigan State Law. Filing of this form allows the City Treasurer and the City Assessor to mail tax and assessment statements to designated agents. This statement may be revoked by the property owner at any time by way of written notice to the City Treasurer or Assessor.

OFFICE USE ONLY

Staff Initials _____ WO # _____

Last 3 Digits of ID _____ Date _____

Last Updated: 9/7/12