

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