

# Lower Bucks County Joint Municipal Authority

7811 New Falls Road, Levittown, PA 19055  
Phone: (215) 945-7400 | Fax: (215) 945-7281

## Request for Mailing Address Change on Water/Sewer Account

**This form is only to be used for a change in mailing address. Only authorized contacts listed on an account may submit this form.**

Owner: \_\_\_\_\_

Account No.: \_\_\_\_\_

Service Address: \_\_\_\_\_

Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Telephone #: \_\_\_\_\_ Email: \_\_\_\_\_

Change Requested: \_\_\_\_\_

Reason for Change: \_\_\_\_\_

Effective Date: \_\_\_\_\_

**Please note - changes cannot be made to accounts with outstanding concerns or balances.**

**This form must be filled out in its entirety before an account can be modified.**

FOR INTERNAL USE ONLY:

CHANGED BY (INITIALS): \_\_\_\_\_

DATE CHANGED: \_\_\_\_\_