



Town of Mountain Village
455 Mountain Village Blvd Ste A
Mountain Village CO 81435
970.369.6408

Account Information Change

PLEASE COMPLETE AND RETURN:

MAIL: Billing Department, 455 Mountain Village Blvd Ste A, Mountain Village CO 81435
 FAX: 970.369-6459 EMAIL: tmvbilling@mntvillage.org

Customer Name: _____ Date: _____

Service Street Address: _____

Utility Account Number:

OR

Broadband/Cable Account Number:

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VOTER REGISTRATION CHANGE OF ADDRESS FORM MUST BE SUBMITTED TO THE TOWN CLERK SEPARATELY.
 VISIT WWW.TOWNOFMOUNTAINVILLAGE.COM FOR MORE INFORMATION.

ACCOUNT INFORMATION CHANGE

THIS FORM MUST BE COMPLETED BY THE PROPERTY OWNER FOR UTILITY ACCOUNTS

NEW BILLING CONTACT INFORMATION

Billing Contact/Entity:	
Mailing Address:	
Primary Phone Number:	
Secondary Phone Number:	
Email Address:	

OWNER CONTACT INFORMATION

Mailing Address:	
Primary Phone Number:	
Secondary Phone Number:	
Email Address:	

Printed Name: _____ Title: _____

Signature: _____ Date: _____

As the property owner or authorized agent of the property, I hereby authorize the Town of Mountain Village to make the above changes to the billing information on the listed account(s). It is understood that these changes do not transfer liability to the listed person or entity.