

Please complete this form and return to:

Manalapan Town Hall 600 So. Ocean Blvd. Manalapan, FL 33462

Phone: 561-383-2543 Fax: 561-585-9498

Email: utilities@manalapan.org

ACCOUNT UPDATE FORM

[] Update Mailing Address

Please select one of the following:

	Jpdate Contact Information (i.e teleph Other (Please Specify):		
Account No.:	Customer No.:	Effective Date :	
Name(s) on Account:			
Service Address:			
Home Phone:	Cell Phone:	Email:	
Mailing Address:			
City:	State:	Zip Code:	
Additional Comments:			
Signature of Account Holder/A	Agent:	Date:	
This form	n must be notarized in order to p	rocess your request.	
STATE OF			
COUNTY OF			
Subscribed and sworn to (or affirmed)	before me this day of		
[] who is perso	nally known to me or [] produced _		as identification.
Notary Public (Signature of Notary)	(Seal)		
My Commission Expires:			