



ACCOUNT NAME CHANGE REQUEST

DATE: \_\_\_\_\_ UTILITIES ACCOUNT NUMBER: \_\_\_\_\_

PRESENT ACCOUNT NAME: \_\_\_\_\_

ACCOUNT ADDRESS: \_\_\_\_\_

Present account holder is deceased. - (Documentation proving the parties requesting the name change are the authorized executor of the estate or heir). \*A deposit and service charge may be required for service to be transferred.

Marriage - (A copy of the marriage certificate is required or the updated Driver's License). \*If adding the name of a new spouse, please see "addition of name" instructions.

Dissolution of Marriage - (Copy of divorce decree awarding home to you)

Addition of Name - The present account holder must be the owner of the property. \*The person being added to the account is equally responsible for payment of all fees or charges due on the account. The original account holder's name will not be removed from the account. Any deposits or credits on the account will be refunded payable to both account holders.

Other - Reason as follows : \_\_\_\_\_ ( Documentation must accompany this form.)

\*\*\*\*\*Due to space restrictions, there can only be two (2) names on one account\*\*\*\*\* Federal or State issued photo ID for original account holder must be provided when completing this form

PLEASE PRINT NAME(S) AS IT IS TO APPEAR ON THE ACCOUNT:

\_\_\_\_\_

PHOTO ID #: \_\_\_\_\_ LAST 4 OF SOCIAL SECURITY #: \_\_\_\_\_ (A copy of your federal or state issued photo ID must be provided if mailing or faxing this form)

PHONE: \_\_\_\_\_ EMAIL: \_\_\_\_\_

MAILING ADDRESS IF DIFFERENT THAN SERVICE ADDRESS:

\*CONTRACTUAL OBLIGATIONS OF NAMED ACCOUNT HOLDERS

I agree to assume responsibility for the payment of all water and/or sewer fees and charges at the above service address. I further agree to conform to the rates, rules and regulations of the Hernando County Water and Sewer District for water and/or sewer service which are now or hereafter in force.

\_\_\_\_\_  
New/Additional Account Holder's Signature

\* AUTHORIZATION FOR CUSTOMER ACCOUNT NAME CHANGE:

I certify that I am the present account holder and as such am authorized to initiate the requested name change. I acknowledge that this authorization is an amendment to the original service contract on file with Hernando County Utilities Department.

\_\_\_\_\_  
Account Holder's Signature