## **WATER AND SEWERAGE AUTHORITY**

## **CUSTOMER INFORMATION CHANGE FORM**



NAME/ PROPERTY ADDRESS/ MAILING ADDRESS

|  | Please Comple   | ete Form In BLOCK LETT | TERS   |  |  |  |  |  |
|--|---|------------------------|--|--|--|--|--|--|
| ✓ TICK APPROPRIATE BOX(ES) AN  | ND COMPLETE RELEVANT S  | ECTIONS                | FOR OFFICIAL USE ONLY                        |  |  |  |  |  |
| NAME CHANGE  |   |                        | CASE ID:                                     |  |  |  |  |  |
| PROPERTY ADDRESS CHANGE  |   |                        |  |  |  |  |  |  |
| MAILING ADDRESS CHANGE   |   |                        |  |  |  |  |  |  |
| APPLICANT INFORMATION  |   |                        |  |  |  |  |  |  |
| Name of Applicant  | Surname   | First name             | Other  |  |  |  |  |  |
| Property Owner   | Surname   | First name             | Other  |  |  |  |  |  |
| Company Name   | Carrianis   |                        |  |  |  |  |  |  |
| Identification   | ational ID / Driver's Permit / Passpo   | rt No.                 | National ID / Driver's Permit / Passport No. |  |  |  |  |  |
| Phone Contact (1)  |   | Phone Contact (        | 2)   |  |  |  |  |  |
| E-mail Address   |   |                        |  |  |  |  |  |  |
| ACCOUNT INFORMATION  |   |                        |  |  |  |  |  |  |
| Account ID:  |   | ]                      |  |  |  |  |  |  |
| Previous   |   | Current                |  |  |  |  |  |  |
| Land & Building Number   | -   | Land & Building        | Number -                                     |  |  |  |  |  |
|  |   |                        |  |  |  |  |  |  |
| NAME CHANGE  | Requirements: Certificate of Payment from the District Revenue Office/City Hall or Borough Corporation 2 valid copies of Picture Identification (National ID card, Driver's Permit or Passport), Copy of Registered Deed for Property/ Certificate of Amendment and an Articles of Amendment (for Corporate Entities and Statutory Declaration. Non Refundable Payment Fee - \$95.00 (VAT INCL.)  N.B Authorization is required if applying on behalf of Owner. |                        |  |  |  |  |  |  |
| Previous Land Owner(s)   |   |                        |  |  |  |  |  |  |
|  | Surname   | First name             | Other  |  |  |  |  |  |
| Current Land Owner(s)  | Surname   | First name             | Other  |  |  |  |  |  |
| Previous Building Owner(s)   |   | <u> </u>               | O.I.   |  |  |  |  |  |
| Current Building Owner(s)  | Surname   | First name             | Other  |  |  |  |  |  |
|  | Surname   | First name             | Other  |  |  |  |  |  |
| PROPERTY ADDRESS CHANGE  Requirements: 2 valid copies of Picture Identification (National ID card, Driver's Permit or Passport),  TTPOST Postal Card. N.B Authorization is required if applying on behalf of Owner |   |                        |  |  |  |  |  |  |
|  | g No Apt. i   | No. Postal C           | ode Lot                                      |  |  |  |  |  |
| LP   | Mile Mark   |                        |  |  |  |  |  |  |
| Street   |   |                        |  |  |  |  |  |  |
| City/ Town   |   |                        |  |  |  |  |  |  |
| New Updated Address Building   | No Apt. N   | lo. Postal C           | Code Lot                                     |  |  |  |  |  |
| LP<br>Street   | Mile Mark   |                        |  |  |  |  |  |  |
| Ī  |   |                        |  |  |  |  |  |  |

| MAILING ADDRESS CHA           | NGE .                    | Requirements: 2 valid copies of Picture Identification (National ID card, Driver's Permit or Passport), TTPOST Postal Card. N.B Authorization is required if applying on behalf of Owner |                               |                               |  |  |
|-------------------------------|--------------------------|--|-------------------------------|-------------------------------|--|--|
| Previous Address              | Building No.             | Apt. No  | Postal Code                   | Lot                           |  |  |
|                               | LP Mile                  | Mark   |                               |                               |  |  |
| Street                        |                          |  |                               |                               |  |  |
| City/ Town                    |                          |  |                               |                               |  |  |
| New Updated Addres            | <b>s</b> Building No.    | Apt. No  | Postal Code                   | Lot                           |  |  |
| Street                        | LP Mile                  | Mark   |                               |                               |  |  |
| City/ Town                    |                          |  |                               |                               |  |  |
| DECLARATION                   |                          |  |                               |                               |  |  |
| I/We                          |                          | t  | he Tenant/Agent/Owner ce      | rtify that the information    |  |  |
| above is true and corre       | ect to the best of my kr | owledge and ability.   | I/We agree that if the above  | ve information is found to be |  |  |
| false or misleading tha       | t I/We shall indemnify   | the Water and Sewe   | rage Authority from all clain | ns, actions and demands       |  |  |
| arising therefrom.            |                          |  |                               |                               |  |  |
|                               |                          |  |                               |                               |  |  |
| Customer Name (BLOCK LETTERS) |                          | Custon   | ner Signature                 | Date                          |  |  |
| Customer Service              | Representative           | Supervi  | sor Signature                 | <br>Date                      |  |  |

ALL PAYMENTS MUST BE MADE BY CASH, CERTIFIED CHEQUE, CREDIT/ DEBIT CARD

## **CUSTOMER BUSINESS SERVICES CENTRES**

Head Office: Farm Road, St Joseph: 662-2302 Ext 2659/ 2672

Kew Place: Phillip Street, Port Of Spain – 662-2302 Ext 4611/ 4612/ 4613

Arima: O'Meara Plaza, O'Meara Road – 662-2302 Ext 6081/ 6082/ 6083

Couva: Corner, Millard Street & Southern Main Road – 662-2302 Ext 4907/ 4908

Chaguanas: Corner, Manic Street & Market Street – 662-2302 Ext 6304/ 6305/ 6308/11

San Fernando: Mon Chagrin Street – 662-2302 Ext 6189/ 6115

Penal: Dookie Street – 662-2302 Ext 4930/ 4931
Princes Town: King Street – 662-2302 Ext 6850/ 6851
Sangre Grande: River Street – 662-2302 Ext 4870/ 4871/ 4872/ 4873
Point Fortin: Guapo Main Road – 662-2302 Ext 4910/ 4911
Trincity: Golden Grove Road, Arouca – 662-2302 Ext 5390/ 5391/ 5392
Tobago: Crooks River, Scarborough – 639-5152, 639-5056 Ext 6815/ 6816