



**INFORMATION UPDATE FORM
WATER, IRRIGATION, AND SEWER ACCOUNT**

_____ Date	_____ Account Number
_____ Owner Name	_____ Spouse Name
_____ Service Address	_____ City State Zip Code
_____ Primary Phone Number	_____ Alternative Phone Number
_____ Mailing Address	_____ City State Zip Code
_____ Email Address	_____ Signature
_____ HOA / Management Company	_____ Contact Name
_____ HOA Contact Phone Number	_____ HOA Contact Email Address

Note: If applicable, attach photo ID, closing documents, and/or lease agreement.

Headquarters Address
516 Village Road, NE Leland, NC 28451
Office: 910-371-9949

Mailing Address
P.O. Box 2230, Leland, NC 28451
Fax: 910-371-6441