

CITY OF SEVIERVILLE

WATER & SEWER MAILING ADDRESS CHANGE REQUEST

Name _____

Service Address _____

Bill to Address _____

City, State, Zip Code _____

Account # _____

Phone # _____

Customer Signature _____

Date _____

PO Box 5500 Sevierville TN 37864

Phone Number(865) 453-5504

Fax (865)453-5518