



TOWN OF MORSE

Utility Change Request Form

Date of Request: _____

Service Address: _____

Requested By: _____

Daytime Phone #: _____

I am: Renter Owner Landlord

**If you are a Renter, please contact the owner of the property regarding any changes. The town of Morse needs written permission from the legal owner.*

Effective Date of Change: _____

Reason for Request: _____

Utilities affected by change: Water Sewer All

Requested Change: Shut off Service Restore Service

Signature

OFFICE USE ONLY:

Date Request completed: _____

Completed by: _____