

Northside Water Users Association, Inc.

Dear Customer:

We would like to make sure the billing and contact information we have on file for you is current and correct.

Please fill in your contact information in the space provided.

Legal Owner's Name(s): _____

Service Address: _____

Parcel Number: _____

Billing Address (if different): _____

E-Mail Address: _____

Cell Phone # _____

Cell Phone Carrier (to enable NSWUA to text emergency information to customer) _____

Contact Name: _____

Primary Phone #: _____

Alternate Contact Name: _____

Alternate Contact Phone #: _____