



Dundurn Rural Water Utility Change of Personal Information

Date: _____

Please change any applicable information and forward to DRWU.

Name: _____

Address: _____

Phone Number (s): _____

E-Mail: _____

If you are selling your property, please provide the following information:

New Owner (s) name: _____

New Owner(s) phone number: _____

Effective date of sale: _____

For Office Use Only

Programs to be updated:

| | |
|--------------------------|------------------------|
| <input type="checkbox"/> | Utility Program |
| <input type="checkbox"/> | Subdivision |
| <input type="checkbox"/> | Pumphouse |