



CALAVERAS COUNTY WATER DISTRICT

120 Toma Court • PO Box 846 • San Andreas, CA 95249 • Main line (209) 754-3543

Update Account Information Form

Current Information:

Account number _____

Name _____

Social Security number _____

Billing address _____

City, state, zip code _____

Phone number _____

Email address _____

New Information:

Name/care of _____

Billing address _____

City _____

State & zip code _____

Phone number _____

Email address _____

Please allow up to 30 days for address information to be updated.

I recognize that this does not relieve me of responsibility for any delinquent or unpaid charges or related costs should they occur. As a legal deeded owner, I am solely responsible for all costs associated with this account.

Owner signature

Date