

JOINT MUNICIPAL WATER & SEWER COMMISSION

ADD SECONDARY FORM

Date: _____

Account Number: _____

Primary Name on Account: _____

Service Location: _____

Add Secondary to Account

I, the primary account holder, am requesting to add the following person to my account. Both parties will be held liable for all account transactions and previous balances from this date forward. If the account is ever terminated, any deposits or refunds will be issued jointly.

I also understand that the primary or secondary account holder may not remove their names from the account unless service is terminated.

(All parties must provide a copy of their driver's license.)

Secondary Name to Be Added: _____

Secondary Social Security #: _____

Primary Signature: _____

Secondary Signature: _____

Office Use Only

_____ Verified Driver's License of Both Parties

Deposit Level: _____ Report #: _____

Completed by: _____ Date: _____