Account Number:	
Customer Number:	

Madison County Water DepartmentChange of Contact Information

You may submit this document in person, by mail, or by email.

Service Address:			
First Name:	Middle Name:	Last Name:	
Are you the owner or tenan	t of this property?		
Mailing Address:			
Home Phone:			
Work Phone:			
Cell Phone:		14-7-7	
Email Address:			
	750		
Signature If mailing or emailing, pleas	se include a copy of your ide	Date	
II maining of channing, pica	se merude a copy of your rue	attrication.	
	DEP	AB	
Office Use Only: Application Received By: Date Received:			

Madison County Water Department PO Box 1508, Normal, AL 35761 246 Shields Road, Huntsville, AL 35811 256-746-2888 Water1@MadisonCountyAL.gov