

WATER AND SEWERAGE AUTHORITY

CUSTOMER INFORMATION CHANGE FORM

NAME/ PROPERTY ADDRESS/ MAILING ADDRESS



Please Complete Form In BLOCK LETTERS

✓ TICK APPROPRIATE BOX(ES) AND COMPLETE RELEVANT SECTIONS

NAME CHANGE	<input type="checkbox"/>
PROPERTY ADDRESS CHANGE	<input type="checkbox"/>
MAILING ADDRESS CHANGE	<input type="checkbox"/>

FOR OFFICIAL USE ONLY

CASE ID: _____

APPLICANT INFORMATION

Name of Applicant _____
Surname First name Other

Property Owner _____
Surname First name Other

Company Name _____

Identification _____
National ID / Driver's Permit / Passport No. National ID / Driver's Permit / Passport No.

Phone Contact (1) **Phone Contact (2)**

E-mail Address _____

Notice: By providing your contact details, you agree that the Water and Sewerage Authority ("the Authority") may use your mobile number or email address to send you automated alerts and important notifications regarding your account, service interruptions, or billing matters via SMS, WhatsApp, or email.

ACCOUNT INFORMATION

Account ID:

Previous Land & Building Number	<input type="text" value="-"/>	Current Land & Building Number	<input type="text" value="-"/>
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NAME CHANGE

Requirements: Certificate of Payment from the District Revenue Office/City Hall or Borough Corporation, 2 valid copies of Picture Identification (National ID card, Driver's Permit or Passport), Copy of Registered Deed for Property/ Certificate of Amendment and an Articles of Amendment (for Corporate Entities) and Statutory Declaration. **Non Refundable Payment Fee - \$95.00 (VAT INCL.)**
N.B. - Authorization is required if applying on behalf of Owner.

Previous Land Owner(s) _____
Surname First name Other

Current Land Owner(s) _____
Surname First name Other

Previous Building Owner(s) _____
Surname First name Other

Current Building Owner(s) _____
Surname First name Other

PROPERTY ADDRESS CHANGE

Requirements: Certificate of Payment from the District Revenue Office/City Hall or Borough Corporation, 2 valid copies of Picture Identification (National ID card, Driver's Permit or Passport), TTPOST Postal Card
N.B. - Authorization is required if applying on behalf of Owner

Previous Address Building No. _____ Apt. No. _____ Postal Code _____ Lot _____
 LP _____ Mile Mark _____
 Street _____
 City/ Town _____

New Updated Address Building No. _____ Apt. No. _____ Postal Code _____ Lot _____
 LP _____ Mile Mark _____
 Street _____
 City/ Town _____

MAILING ADDRESS CHANGE

Requirements: 2 valid copies of Picture Identification (National ID card, Driver's Permit or Passport), TTPOST Postal Card. **N.B. - Authorization is required if applying on behalf of Owner**

Previous Address Building No. _____ Apt. No. _____ Postal Code _____ Lot _____

LP _____ Mile Mark _____

Street _____

City/ Town _____

New Updated Address Building No. _____ Apt. No. _____ Postal Code _____ Lot _____

LP _____ Mile Mark _____

Street _____

City/ Town _____

DECLARATION

I/Wethe Tenant/Agent/Owner certify that the information above is true and correct to the best of my knowledge and ability. I/We agree that if the above information is found to be false or misleading that I/We shall indemnify the Water and Sewerage Authority from all claims, actions and demands arising therefrom.

_____ **Customer Name** (BLOCK LETTERS)

_____ **Customer Signature**

_____ **Date**

_____ **Customer Service Representative**

_____ **Supervisor Signature**

_____ **Date**

ALL PAYMENTS MUST BE MADE BY CASH, CERTIFIED CHEQUE, CREDIT/ DEBIT CARD

CUSTOMER BUSINESS SERVICES CENTRES

- Head Office:** Farm Road, St Joseph: 662-2302 Ext 2659/ 2672
- Kew Place:** Phillip Street, Port Of Spain – 662-2302 Ext 4611/ 4612/ 4613
- Arima:** O'Meara Plaza, O'Meara Road – 662-2302 Ext 6081/ 6082/ 6083
- Chaguanas:** Corner, Manic Street & Market Street – 662-2302 Ext 6304/ 6305/ 6308/11
- San Fernando:** Mon Chagrin Street – 662-2302 Ext 6189/ 6115
- Princes Town:** King Street – 662-2302 Ext 6850/ 6851
- Point Fortin:** Guapo Main Road – 662-2302 Ext 4910/ 4911
- Trincity:** Golden Grove Road, Arouca – 662-2302 Ext 5390/ 5391/ 5392
- Tobago:** Crooks River, Scarborough – 639-5152, 639-5056 Ext 6815/ 6816