



Dominica Water and Sewerage Company Limited
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Commonwealth of Dominica
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CHANGE TO ACCOUNT

Please make the following changes to A/c No:

EXISTING NAME ON ACCOUNT:

ADDRESS:.....

CONTACT NO:

Tick box which is applicable

COMPLETION OF CONSTRUCTION:
DATE OF COMPLETION:.....

CHANGE OF NAME:
NEW NAME:

CHANGE OF BILLING ADDRESS:
NEW ADDRESS:.....

Name: Signature:

OWNER/AGENT

OWNER/AGENT

Date: