



CITY OF WEST ORANGE, TEXAS

Sanitation Account Change Form

Date of authorization: _____

Property Owner's Name: _____

Property Owner's Mailing Address: _____

Property Owner's Email Address: _____

Property Owner's Driver's License # _____ DL State _____

Contact telephone # _____

Street address of service: _____

Is this residence a rental? Yes No

Account # (if available) _____

By completing and signing this form, I am authorizing the following change(s) to this sanitation account:

Placing it temporarily "on hold" while it is vacant (*I understand that I MUST reactivate service at such time as property is no longer vacant.*)

Remove Add the following individual(s) to account:

(*I understand as property owner, however, that I am ultimately responsible for payment of sanitation services.*)

Change Mailing Address to:

Reactivation of the account under property owner's name

Stop Service

Authorization of Property Owner

NOTE: A COPY OF YOUR PHOTO IDENTIFICATION MUST BE ON FILE AT CITY HALL IN ORDER TO FINALIZE THIS TRANSACTION. YOU MAY DELIVER IT IN PERSON, MAIL IT, FAX IT (409-882-0652) OR EMAIL IT (sanitation@cityofwestorange.com).