



**CITY OF WATERTOWN  
PO BOX 279  
309 LEWIS AVENUE  
WATERTOWN, MN 55388  
952-955-2681**

**RESIDENT MOVING OUT INFORMATION**

Resident \_\_\_\_\_ Renter \_\_\_\_\_

Property Owner's Name: \_\_\_\_\_

Service Address: \_\_\_\_\_

Phone: \_\_\_\_\_

Email: \_\_\_\_\_

Renter Name (If Applicable): \_\_\_\_\_

Renter Phone: \_\_\_\_\_

Closing/Moving Date: \_\_\_\_\_

Forwarding Address for Refunds: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Final Meter Reading: \_\_\_\_\_

Direct Pay: Yes \_\_\_\_\_ No \_\_\_\_\_

New Owners/Renters: \_\_\_\_\_

Phone No. \_\_\_\_\_