



ACCOUNT CHANGE REQUEST FORM

Administrative Offices | 44405 Six Mile Road, Northville, MI 48168-9670 | 248-348-5800

Name, Address, Contact Information of Person Making Request:

Requestor Name: _____

Property Address: _____

Phone Number: _____ Email: _____

Relationship to Property: Owner Renter Other: _____

Apply Change(s) to:

Water & Sewer Bills Tax Bills/Assessment Notice

Type of Request (Check all that apply):

New Mailing Address:

Street Address _____

City, State, Zip _____

Name Change:

From: _____

To: _____

New Email Address:

From: _____

To: _____


Cancel Autopay:

Water & Sewer Summer Tax Winter Tax

Reason for Change(s): _____

Signature of person making the request: _____

Date: _____

<p>Return completed form to: </p>	<p>Email - onlinepayments@twp.northville.mi.us Mail - 44405 Six Mile Rd, Northville, MI 48168 Fax - (248) 348-8271</p>
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For Township Use Only

Copy sent to: Water & Sewer Assessing