



WATER AUTHORITY OF GREAT NECK NORTH

**WATER AUTHORITY OF GREAT NECK NORTH
REQUEST FOR CHANGE OF MAILING ADDRESS**

To: The Water Authority of Great Neck North

From: _____

Account #: _____

Please change the mailing address on my account from:

_____ to:

_____.

Signature

Date

Received by:

WAGNN Employee

Date

Upon receipt of your signed document, your requested changes will be made to your account.

Thank you