

Fax: (425) 556-2909 Utility Billing 3NFN, (425) 556-2152 PO BOX 97010, Redmond, WA 98073-9710

Email: <u>utilitybilling@redmond.gov</u>

REQUEST FOR FINAL WATER & SEWER BILL - SELLER

~~~Use this form only if you are selling your property. As long as you own the property, you are responsible for the water/sewer bills.

- Escrow companies please complete "Request for Estimate" form.
- For mailing address changes, please complete "Change Account Information" form.
- If you will be leasing your home and would like to have tenants billed directly, please complete "Request to Bill Tenant" form.

| Date:              |                                         | PLEASE PRINT, Thank you.                              |  |
|--------------------|-----------------------------------------|-------------------------------------------------------|--|
| Redmond Service    |                                         |                                                       |  |
|                    |                                         | Closing Date:                                         |  |
| Account number:_   |                                         | Telephone number:                                     |  |
|                    | Al                                      | ternate telephone number:                             |  |
| Forwarding Addres  | ss: (to send the final bill)            |                                                       |  |
|                    |                                         |                                                       |  |
| Buyer's Name:      |                                         | Date of Possession:                                   |  |
|                    |                                         | ng date, please explain below in additional comments. |  |
| Additional Comme   | nts:                                    |                                                       |  |
|                    |                                         |                                                       |  |
|                    |                                         |                                                       |  |
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|                    |                                         |                                                       |  |
|                    |                                         |                                                       |  |
|                    |                                         |                                                       |  |
| Requestor's Name   |                                         | Telephone number                                      |  |
|                    |                                         |                                                       |  |
| Please mail or fax | the completed form to the City          | y of Redmond.                                         |  |
| Mailing Address:   | City of Redmond<br>Utility Billing 3NFN | Phone Number: (425) 556-2152                          |  |

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