



CHANGE OF OWNERSHIP, TANUM

Date: _____

Property designation: _____

Property address: _____

PREVIOUS OWNER:

Name: _____

Billing address: _____

NEW OWNER

Name: _____

Date of birth: _____ Phone: _____

Billing address: _____

e-mail: _____

WATER & SEWAGE

Reading of water meter: _____ Meter number: _____

No meter / Not full time residents: _____ Number of persons in the household: _____

Sludge emptying _____ (Remember to order final emptying in advance)

Notification is made by: _____