



# CITY OF FULSHEAR

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Fulshear, Texas 77441

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www.fulsheartexas.gov

## Change of Account Information (PLEASE PRINT in Blue or Black Ink)

Date: \_\_\_\_/\_\_\_\_/\_\_\_\_

Responsible Party Name: \_\_\_\_\_  
Last First M.I.

Physical/Service Address: \_\_\_\_\_  
Street  
\_\_\_\_\_  
City State Zip Code

Please make changes to the following information:

- Responsible Party Name: \_\_\_\_\_  
(Requires proof: DL, Marriage License, Divorce Decree, Death Certificate, etc.)
- Primary Phone: ( \_\_\_\_ ) \_\_\_\_\_ - \_\_\_\_\_  
Alternate Phone: ( \_\_\_\_ ) \_\_\_\_\_ - \_\_\_\_\_
- Email Address: \_\_\_\_\_

Mailing/Service Address: \_\_\_\_\_  
(Service Request Form Required) Street  
\_\_\_\_\_  
City State Zip Code

- Discontinue of Bank Draft  
(If changing bank draft information, please submit Automatic Payment Plan Application and a voided check.)
- Other: \_\_\_\_\_

Responsible Party Signature: \_\_\_\_\_

Account Number: \_\_\_\_\_ - \_\_\_\_\_ - \_\_\_\_\_

For Office Use Only:

Date Received: \_\_\_\_/\_\_\_\_/\_\_\_\_ by: \_\_\_\_\_