



# City of Ecorse

3869 WEST JEFFERSON  
ECORSE, MICHIGAN 48229  
PHONE: (313) 386-2520  
FAX: (313) 386-4316

*The City of Friendship*

## APPLICATION TO CHANGE PUBLIC UTILITIES

Date of Application: \_\_\_\_\_

Name: \_\_\_\_\_

Service Address: \_\_\_\_\_

Mailing Address: \_\_\_\_\_

Telephone: \_\_\_\_\_

Email: \_\_\_\_\_

Driver's License Number: \_\_\_\_\_

Rental:  Yes  
 No

If Yes:

Landlord Name: \_\_\_\_\_

Landlord Mailing Address: \_\_\_\_\_

Landlord Telephone Number: \_\_\_\_\_

I am requesting service to be turned  **ON** or **OFF**  at the above listed service address effective \_\_\_\_\_, \_\_\_\_\_.

(Signature)

### Internal Use Only

Deposit Required:  Yes  
 No

Identification Verified:  Yes  
 No

\_\_\_\_\_  
Name

\_\_\_\_\_  
Date

\_\_\_\_\_  
Title