

Putnam Public Service District

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Updated 3/30/2023



Change of Name and / or Mailing Address

ACCOUNT NUMBER: _____

CUSTOMER NAME *(as it appears on Billing Statement):* _____

MAILING ADDRESS *(as it appears on Billing Statement):* _____

TELEPHONE NUMBER: _____

Note: This form is to be used ONLY in the event of a legal name change of a customer's first and/or last name or if the billing address for a given property has changed. Applicants for service at a different location must complete a new application for the new address. The District reserves the right to request documentation of changes in name and/or address.

PLEASE CHANGE THE ABOVE NAME AND/OR MAILING ADDRESS TO THE FOLLOWING:

REASON FOR CHANGE:

(FOR EXAMPLE – LEGAL NAME CHANGE; MARRIAGE; 911 ADDRESS CHANGE; NOW USING PO BOX #; ETC.)

CUSTOMER SIGNATURE: _____ **DATE:** _____

FOR PUTNAM PSD USE ONLY

CHANGE REQUEST RECEIVED VIA:

EMAIL IN-OFFICE FAX MAIL DROP BOX OTHER _____

DATE RECEIVED: _____ **STAFF:** _____

CHANGE ENTERED: YES NO - REASON: _____

ADDITIONAL INFORMATION: