



CITY OF NEW BALTIMORE  
36535 Green Street, New Baltimore, MI 48047  
**New Resident/Name Change  
Information Form**

**Current Date:** \_\_\_\_\_

**Reason for Account Change:** \_\_\_\_\_  
*(New tenant, new homeowner, name change, etc.)*

**Property Address:** \_\_\_\_\_

**Billing Name:** \_\_\_\_\_

**Phone Number:** \_\_\_\_\_

**Email Address:** \_\_\_\_\_  
*(optional, for paperless billing)*

**Date of Occupancy:** \_\_\_\_\_

**Ownership or Rental:** \_\_\_\_\_

**Billing Address:** \_\_\_\_\_  
*(ONLY if different than property address)*

**WELCOME TO NEW BALTIMORE!**