



Residential Account: Change of Name Request

Please complete the following form to request a name change on your account:

Account Number: _____ Date: _____

Existing Account Holder information:

Name on account:	Primary Phone:
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Email:

Service Address:

New Account Holder Information:

Update name on account to:

Email: (if different from above)

Primary Phone: (if different from above)

Please select a reason for change:

☐ Marriage
(must provide copy of marriage certificate)

☐ Legal Name Change
(must provide court order for name change)

☐ Death
(must provide copy of death certificate & proof of evidence of heirship)

☐ Divorce
(must provide copy of divorce decree)

Please mail, e-mail or fax your request to:

City of Bullard
ATTN: Utility Billing
P.O. Box 107
Bullard, TX 75757

Phone: (903) 894-7223
Fax: (903) 894-8163
Email: Utilities@bullardtexas.net

Account Holder Signature: _____ Date: _____

Co-Account Holder Signature: _____ Date: _____

For Office Use Only

Received/Completed By: _____	Date: _____
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