



Copeville SUD

Strengthening our community with
quality and service

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Customer Information Update

1. Updated Customer Information-

Contact Information:

Contact Name: _____

Address: _____ City: _____ State: ___ Zip: _____

Phone Number: _____ Email: _____

2. Authorization to Update Customer Information-

By signing my signature below, I am certifying that the above information is true and accurate to the best of my knowledge. I also certify that I am an authorized agent and allowed to execute this customer update form.

Print Name

Authorized Signature

Date