



BURT TOWNSHIP BOARD

ALGER COUNTY

P.O. BOX 430

E21837 GRAND MARAIS AVE.

GRAND MARAIS, MI 49839-0430

906-494-2381

Fax: 906-494-2627

www.burttownship.com

Burt Township Water Department Account Information

Property Information

Property/Parcel number: _____

Physical 911 Number and Street Name: _____

Effective Date of Change: _____

Is this a new build? ____ Yes ____ No

If yes, please submit building plans with this form

Is the property a business? ____ Yes ____ No

What type? Retail Restaurant Bar Other: _____

Public restrooms? ____ Yes ____ No

New Owner/Resident Information and Billing Address

Name(s): _____

Address: _____

City/State/Zip: _____

Telephone: _____

Email: _____

If you would like to receive your water bill electronically, please provide an email.

Rental/Owner Agreement

If you are renting, you must receive the property owner's signature for this change of address and billing. All responsibility for unpaid water bills will revert to the property owner after 6 months of non-payment from the renter.

Property Owner Signature: _____

Signature

Date

I authorize the Burt Township Water Department to bill my account as noted above and I accept responsibility for all charges for service. I understand that payments are due as noted above. Attached is a copy of my driver's license or other photo ID to be used to verify my identity, to protect my information, and to help avoid identity theft.

New Owner/Resident Signature: _____

Signature

Date

