

Name Change Form Instructions

The attached Name Change Form is provided for our customers who choose to keep existing service, but need a name change on an account due to marriage, divorce or legal name change. A name change on an account will assume the balance on the existing account.

The account number can be located in the top left-hand corner of your bill and is the last eight characters past the dash. For example, the account number on this sample is 51699234:

Customer Account Number:
011234-51699234

The meter number can be left blank. All other information should be completed as listed on the form.

Please complete the attached form, sign it and return it to the city with a copy of your marriage certificate, divorce decree or legal supporting documents, in one of the following four ways: include the document with your next payment; mail it separately to the City of Pensacola, Treasury Division, P.O. Box 12910, Pensacola, FL 32521-0045; fax it to Treasury at (850) 435-1827; or bring the completed form to the Treasury office on the first floor of City Hall, facing Reus Street.

If you have any questions, please contact Customer Service Monday-Friday between 8:00 a.m. to 5:00 p.m. at (850) 435-1800.

Name Change Form

Date: (MM/DD/YY) _____

Customer – Account Number: -

Service Address: _____ Meter Number: _____

Name of Current Account Holder (print): _____

Signature of Current Account Holder: _____

Social Security Number: - -

I am the current account holder indicated above. I am submitting this form due to the reason checked below:

- Marriage - Please find attached a copy of my marriage certificate and drivers license
- Divorce – Please find attached a copy of my divorce decree and drivers license
- Legal Name Change – Please find attached legal supporting documents and driver’s license

OR

I am submitting this form to transfer services to the new account holder (listed below) for the following reason:

Please find attached the following documentation to support this change:

- Copy of Lease
- Affidavit
- Death Certificate
- Other

Name of New Account Holder: _____

Social Security Number: - -

Date of Birth: (MM/DD/YYYY) _____

Drivers License Number: _____ State of Issue: _____

Home Phone: _____ Cell Phone: _____

Signature of New Account Holder: _____

Note: In lieu of a connect fee, a new account holder accepts the outstanding balance of the current account holder listed on this form.