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ACCOUNT NAME CHANGE AUTHORIZATION

This authorization form is for the purpose of changing the name on a City of Pflugerville utility account from one name to another due to change in marital status or death of account holder.

Reason for change: _____

ACCOUNT INFORMATION

Account #: _____

Service Address (include city, state & zip): _____

CURRENT ACCOUNT HOLDER

Name: _____

Work Phone #: _____ Cell phone #: _____ Home Phone #: _____

Identification (TX DL#): _____ Email Address: _____

I authorize The City of Pflugerville to change the name on the above referenced utility account to the name shown below. I understand that I relinquish any utility deposit on record as well as the entire transaction/payment history on the account.

Signature: _____ Date: _____

NEW ACCOUNT HOLDER

Name: _____

Mailing Address (if different from service address): _____

Work Phone #: _____ Cell Phone #: _____ Home Phone #: _____

Identification (TX DL#): _____ Email Address: _____

I authorize The City of Pflugerville to change the name on the above referenced utility account from the name shown above to my name. I understand that any balance due at this time will be my responsibility and the entire transaction/payment history will remain on the account in my name.

Signature: _____ Date: _____