

**SHARON WATER SUPPLY CORPORATION  
CHANGE OF ADDRESS FORM**

Sharon WSC Account Number: \_\_\_\_\_

Name: \_\_\_\_\_

Old Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_

New Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_

Home Phone: \_\_\_\_\_

Work Phone: \_\_\_\_\_

Cell Phone: \_\_\_\_\_

Other: \_\_\_\_\_

If applicable, I further represent to the Corporation that my spouse joins me in this request, and I am authorized to execute this Request for Change of Address on behalf of my spouse as a joint owner of the aforementioned property.

Member Signature: \_\_\_\_\_ Date: \_\_\_\_\_

**Please return to:** Sharon Water Supply Corporation  
6175 N. State HWY 37  
Winnsboro, Tx. 75494

Fax: 903-342-5515  
Email: sharonwater3525@gmail.com