



Name/Address Change Form

Village of Mayville
6104 Fulton Street PO Box 219
Mayville MI 48744
989.843.6423 phone
989.843.0123 fax
www.villageofmayville.org

Effective Date: _____

Name/Address to be **changed from**:

Name: _____

Address: _____

City: _____

State: _____ Zip Code _____

Phone Number: _____

Name/Address to be **changed to**:

Name: _____

Address: _____

City: _____

State: _____ Zip Code _____

Phone Number: _____

Service Address: _____

Parcel Number: _____

Account Number: _____

Signature of Owner: _____ Date: _____