



City of Ecorse

3869 WEST JEFFERSON
ECORSE, MICHIGAN 48229
PHONE: (313) 386-2520
FAX: (313) 386-4316

The City of Friendship

APPLICATION TO CHANGE PUBLIC UTILITIES

Date of Application: _____

Name: _____

Service Address: _____

Mailing Address: _____

Telephone: _____

Email: _____

Driver's License Number: _____

Rental: Yes
 No

If Yes:

Landlord Name: _____

Landlord Mailing Address: _____

Landlord Telephone Number: _____

I am requesting service to be turned **ON** or **OFF** at the above listed service address effective _____, _____.

(Signature)

Internal Use Only

Deposit Required: Yes
 No

Identification Verified: Yes
 No

Name

Date

Title