



BOROUGH OF WESTVILLE

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www.westville-nj.com

Change of Mailing Address Request

Utility Records
(Water or Sewer)

SECTION I. APPLICANT INFORMATION (please print)

Name: _____ Date: _____

Current Address: _____

City: _____ State: _____ Zip Code: _____

Email Address: _____ Phone # _____

SECTION II. NEW ADDRESS (please print)

Name: _____ Date: _____

New Mailing Address: _____

City: _____ State: _____ Zip Code: _____

Signature of Owner _____ Date _____

Borough of Westville Use Only:

Application Received: _____

Block _____ Lot _____

Approved by: _____

Date Approved: _____