

## **AFFIDAVIT OF OWNERSHIP**

Street Address of Property:				
	Atlantic City, N	Atlantic City, New Jersey 08401		
Account Number:	Phone Number:			
The Atlantic City Municipal Ut named owner is responsible for pa	tilities Authority (ACMUA) must know the name of the owner ayment of all water service bills.	of the property listed above, and the		
Proof of ownership must be subm	nitted in the form of:			
☐ Notarized Verific	ation of Billing form (complete Notary Acknowledgement bel	ow) or		
☐ Settlement sheet	t (HUD statement) <i>or</i>			
☐ Deed <i>or</i>				
☐ Tax bill				
	ic City with water service is owned by the "Owner/Agent" listentified on the reverse of this page.	ed above,		
I certify that all information provide	ded on this form is true and correct to the best of my knowled	dge.		
Owner's Name (PRINT PLEASE)	Owner's Signature	<u> </u>		
	Date			
	ENT**********************			
On	20 before me,	, Notary Public		
for	county/state, personally appeared			
signer(s) or witness(es) to the above-r	referenced document.			
Notary Public Signature	Notary Public Printed Name			
My commission expires:		NOTARY		
		SEAL		
OFFICE USE ONLY: **********	**************	*****		
☐ Photo ID				

ADDRESS		ACCOUNT NUMBER (if known)
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	•	
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I am the owner/agent for the following property in Atlantic City, NJ:

Note to New Customers: You must contact Atlantic City Sewerage Company for sewer service. Phone: 609-345-0131