

LOWER TRINITY GROUNDWATER CONSERVATION DISTRICT
602 E. Church Street - P.O. Box 1879 - Livingston Texas 77351
(pho) 936.327.9531 (fax) 936.327.9532
(email) ltgcdistrict@livingston.net (web site) www.LTGCD.org

APPLICATION FOR ADDRESS CHANGE

Instructions: Complete form, type or print. This application is used to request an address change for a current well owner or a well address which has been changed by an approved addressing agency. Additional information or explanations may be attached. Note: This form should not be used to transfer ownership of permit, see Application to Amend - Permit Transfer form.

OWNER ADDRESS CHANGE WELL ADDRESS CHANGE (due to re-addressing by approved agency)

Date: _____

-This form may be faxed or mailed-

Current Permit Information: *Required for both changes*

Well Owner: _____	Permit No. _____
Mailing Address: _____	
City: _____	State: _____ Zip: _____

Owner Address Change Information:

<u>New Permit</u> mailing address: _____
Contact: _____
City: _____ State: _____ Zip: _____
Phone: _____ Fax: _____
<u>New Billing</u> mailing address: _____
Contact: _____
City: _____ State: _____ Zip: _____
Phone: _____ Fax: _____
Reason for Change: _____

