



DEPARTMENT OF ENVIRONMENTAL SERVICES

Customer Services Office

2020 N 14th St. Arlington, VA 22201

TEL 703.228.5000 FAX 703.228.7893 TTY 703.228.4611 www.arlingtonva.us

NAME CHANGE REQUEST

Instructions: You may request a name change to an existing account only under certain conditions.

- **The account is not registered for the automatic bank debit program through CAPP.***
- **You assume liability for any unbilled or unpaid charges on the account.**
- **You provide the property owner information as instructed below.**

Current Name on Account: _____

Requested Name Change to: _____

Service Address: _____

Account Number: _____

Telephone Number: _____

Alternate Telephone Number: _____

Last Four SSN: _____

Owner of Property: _____

Owner's Current Mailing Address: _____

Owner's Current Telephone Number: _____

This letter serves as written notification that I have given Arlington County permission to make a name change to the existing utilities account and the account number will remain the same. I have been informed that this is a name change only. I will be held responsible for any outstanding amount yet to be billed or due for this account. Written notification will be sent to the owner of this property, informing him/her of all changes to said account.

Signature: _____

Date: _____

The County will review this request for approval. If the account does not meet our requirements, we will finalize the current account and set up a new account in your name. If a new account is set up, a \$25 new account fee will be on the first bill.

Please email to descontactcenter@arlingtonva.us, or send to the address or fax number above.

*Customer Assessment and Payment Portal managed by the Treasurer's Office.