



EVERGREEN  
METROPOLITAN  
DISTRICT

*Water & Wastewater  
P.O. Box 3819  
Evergreen, CO 80437  
(303) 674-4112 Fax (303) 674-7267  
evergreenmetrodistrict.com*

## Fax Request for Account Status

Date: \_\_\_\_\_ To: \_\_\_\_\_ Billing \_\_\_\_\_

From: \_\_\_\_\_

Fax #: \_\_\_\_\_ 303-674-7267 \_\_\_\_\_ Re: \_\_\_\_\_ Request for Account Status Final \_\_\_\_\_

**Please fill out the following information and account status will be faxed back:**

Title Company Name (Final billing to): \_\_\_\_\_

Contact Phone No. / Fax No.: \_\_\_\_\_

Title CO Mailing Address (Final billing to): \_\_\_\_\_

Property Address: \_\_\_\_\_

Seller: \_\_\_\_\_

\*Close Date: \_\_\_\_\_ Escrow #: \_\_\_\_\_

**Beginning January 1, 2010, a \$25 Service Transfer Fee will be charged to the buyer on their first billing statement.**

Buyer Name: \_\_\_\_\_ Will Buyer occupy? \_\_\_\_\_

Buyer Mailing Address: \_\_\_\_\_

Buyer Phone # / E-mail Address: \_\_\_\_\_

**\* We must be notified if sale does not take place as noted above. Otherwise, account will be transferred based on this information. Fees will be incurred if we are not notified closing did not occur and we proceed as noted on this form.**

**Account Status:**

Account Number \_\_\_\_\_

Current Balance \_\_\_\_\_

Service Period \_\_\_\_\_

Average monthly bill \_\_\_\_\_

Additional Information \_\_\_\_\_

\_\_\_\_\_