



Request to Update Account Information

TOWN OF CAROLINA BEACH
1121 N. Lake Park Boulevard
Carolina Beach, North Carolina 28428
Phone: (910) 458-2983 or (910) 458-4821
Fax: (910) 458-2997
Email: info@carolinabeach.org

Town of Carolina Beach Account Number: _____

Service Address: _____

City: _____ State: _____ Zip Code: _____

Update Address or Email Information

Name: _____

New Mailing Address: _____

City: _____ State: _____ Zip Code: _____

Home Phone: _____ Cell Phone: _____ Work Phone: _____

Email Bill: Yes _____ No _____ Email: _____

I authorize the Town of Carolina Beach to change the mailing address and/or other billing information for the account listed above. I understand that all town correspondence and bills will be mailed to the address, (unless the email option was selected and then bills only will be emailed), from this date forward.

Signature: _____ Date: _____

Request to Close Account

Name: _____

Date Account to be Closed: _____

Forwarding Address: _____

City: _____ State: _____ Zip Code: _____

Landlord/Property Owners Name: _____

I authorize the Town of Carolina Beach to close by water and sewer account on the date listed above. I understand that if there was a deposit paid on my account, it will be applied to the final bill and any monies due back to me will be mailed to the forwarding address listed above. Deposits will be refunded 30 days after account is closed as long as balance is greater than \$5.00.

Signature: _____ Date: _____

For Office Information Only:

Address/Information Updated: _____ Date: _____

TOCB Billing/Customer Service Representative