

Birch Run Township

8425 Main Street • P.O. Box 152 • Birch Run, MI 48415 Phone: (989) 624-9773 • Fax: (989) 624-1177

New Customer Request

Account Number: Service Address:					Date:		
					Zip:		
Name:							
Mailing Address (If different):					Zip:		
Phone 1: Can this # receive tex				ve texts:			
Phone 2: Can this # receive te				ve texts:			
Email:		V	Vould you lik	te to be a pap	erless custo	mer:	
Owner: Renter:					Deposit:		
Emergency Co How would you (Mark all that would ap	like to be no		d on type of	notification	?		
	Phone 1 Voice	Phone 2 Voice	Phone 1 Text	Phone 2 Text	Email	No Notification Desired	
Billing Notifications							
Shut Off/ Delinquent Notices							
Emergency Water Interruptions							
Water Advisories							
I, the undersigned address in Birch I System from the comoved. I underst System must have	Run Townshi date of this ar and that notif	p. I agree to ticle until I r fication must	abide by all to notify the Bire be done in v	the rules and a ch Run Wate	regulations r Supply Sy	of said Water stem that I have	
Signature:					Date:		