Request for RECLASSIFICATION of Water Tariff

| Date: |
|--|
| Name: |
| Address: |
| |
| |
| Account: |
| Meter No.: |
| Sir, |
| Change of Classification |
| Please change my water supply classification from |
| to for the above location. |
| Thank You. |
| Yours, |
| |
| Name: |
| I.C o |
| Tel No |
| For Office Use |
| Site Inspected by: Date: |
| Approved: Yes \(\square \text{No} \square \text{No} \square Remark (If No): |
| Updated in the system: Date: Date: |