

**METRO SIARGAO WATER DISTRICT**

Dapa, Surigao del Norte

**REQUEST FOR:**

**Date:** \_\_\_\_\_

**No.:** \_\_\_\_\_

Change of Name

Change of Account Number

Reconnection

Change of Classification

Change of Meter

Relocation

Change of Billing Address

Disconnection

Others: Specify \_\_\_\_\_

**To: EDP**

Please effect the subject change to the computer database.

From:

To:

Control #: \_\_\_\_\_

Name: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Requested by:

Noted by:

\_\_\_\_\_  
Signature Over Printed Name of Applicant

**ESPERANZA T. SOLLO**

IRMA - A/HRMO-Designate

**METRO SIARGAO WATER DISTRICT**

Dapa, Surigao del Norte

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\_\_\_\_\_

Requested by:

Noted by:

\_\_\_\_\_  
Signature Over Printed Name of Applicant

**ESPERANZA T. SOLLO**

IRMA - A/HRMO-Designate

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Date

The Manager  
Metro Siargao Water District  
Nrgy. 9 Poblacion Dapa,  
Surigao del Norte

I \_\_\_\_\_, Filipino, legal age, and residents of Brgy. \_\_\_\_ Poblacion Dapa, Surigao del Norte hereby authorized Mr./Mrs. \_\_\_\_\_, Filipino, legal age and residents of Brgy. \_\_\_\_ Poblacion Dapa, Surigao del Norte, to change under his/her names the registration of my water service connections. It is therefore manifested that the right and full authority is fully granted to his/her name to be registered as I affix my signature below.

Thank you and Hoping for your kind consideration to grant this request.

Respectfully yours,

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Name of Concessionaire

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New Registered Concessionaire

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Witness

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Witness