Borough of Sea Girt 321 Baltimore Blvd, PO Box 296 Sea Girt, NJ 08750

Enrollment Form: Electronic Water/Sewer Utility Billing Statements

	Name(s) on Account:		
	Service Address:		
	Telephone Number:		
	Email Address:		
	Account Number:		
•		ment form, you are choosing to receive your Borough of Sea ent electronically and will not be receiving printed statements	
•	You have the ability to withdraw your consent at any time by contacting the Borough of Sea Girt at 732-449-9433 extension 117		
•	 The Borough of Sea Girt will email your statement to the email address you provide You may also view your utility bill online at seagirt-nj.gov In order to ensure that we are able to provide you with accurate billing information, you must update us with any change in your email address 		
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•			
•	All electronic bill statements can be printed and saved electronically to your computer for your records If you use spam filters for emails, please add noreply@seagirtboro.com to your approved senders list		
•			
	ning below, I authorize the address.	e Borough of Sea Girt to send utility bills for this account to my	
Signature:		Date:	
Return completed form to:		Borough of Sea Girt Water/Sewer Dept	

Sea Girt, NJ 08750