

SES Business Water Customer Change Request Form

You can use this for to tell us about any changes you need to make to the details of your SES BW account.

| SECTION 1: Supplied Premise | Please complete this section for ALL change requests. | |
|---|---|---|
| Premise address (the address to which the change applies) | | |
| Postcode | | |
| Customer Name | | |
| SESBW Account number | | |
| SPID (found on your bill) | | |
| SECTION 2: Change of Tenancy (CoT) | Please complete this section ONLY if you supplied premise. | are moving OUT OF or moving INTO a |
| | Move out | Move in |
| From date | | |
| New occupant business name | | |
| New occupant billing address (if different from the Premise address in Section 1) | | |
| New occupant contact name | | |
| New occupant contact Tel No | | |
| New occupant email | | |
| Meter reading at COT | | |
| Forwarding address for the closing bill | | Note: all charges remain your responsibility until the new occupant details are fully provided |
| SECTION 3: Billing Address Change | Please complete this section ONLY if you are telling us about a change to your business name or to the address to which we send your bill for the Premise in Section 1. | |
| Name change | | |
| Address change | | |
| Email address | | |
| Telephone Number | | |
| Contact name (for billing queries) | | |
| Contact Telephone Number | | |



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(Continued)

| SECTION 4: Bank detail change | Please complete this section ONLY if you are telling us about a change to your bank details. |
|------------------------------------|---|
| New bank name | |
| New bank account name | |
| New bank address | |
| New account number | |
| New sort code | |
| Previous bank acount number | |
| Previous bank sort code | |
| SECTION 5: Other change request | Please complete this section if you are telling us about any other change not included above. |
| | |

I wish to receive invoices by emails Email address

| SECTION 6: Form submitted by | Please complete this section for ALL change requests. | |
|---------------------------------|---|--|
| Name | | |
| Email address | | |
| Tel Number | | |
| Date | | |

Please email the completed form to query@sesbusinesswater.co.uk

Thank you for your change request.

We will aim to implement the changes you have requested within 21 working days. If we have a query, we will contact you using the details you have provided in Section 6.