



Utility Billing Department
finals@evanscolorado.gov
Phone: 970.475.1170

REQUESTED READ DATE: _____

Title Co: _____
Contact Name: _____
Email: _____
Phone: _____

Service Address: _____

Account # _____ DATE OF CLOSING: _____

TRANSFER OF OWNERSHIP

***** COMPLETED DOCUMENT MUST BE EMAILED OR FAXED IMMEDIATELY AFTER CLOSING *****

SELLER INFORMATION (forwarding address in case of a refund)

Name(s): _____

Forwarding Address: _____ Phone #: _____

Signature(s): _____

BUYER INFORMATION (to receive utility invoice for the Service Address referenced above)

Name(s): _____

Mailing Address: _____ Phone #: _____

Signature(s): _____

As a representative of the Title Company listed above, I certify that the Driver's License/ID number(s) and identity of the Buyer(s) have been verified by our office. We understand that services **will not be transferred to Buyer** until this completed document is received by the City of Evans.

Signature: _____ Title: _____

Printed Name: _____ Date: _____

FORM NOT VALID WITHOUT ESCROW OFFICER'S SIGNATURE

- Utility Payoff amount only accepted for amount indicated on REQUEST FOR ESTIMATED FINAL UTILITY BILLING form
- Payoff check must be received by City of Evans within 14 days of closing to avoid a past due balance and shut off of utility services

City of Evans
1100 37th Street
Evans, CO 80620