



Lone Star Groundwater Conservation District
PO Box 2467
Conroe, Texas 77305
Phone: (936) 494-3436 Metro: (936) 441-3437 Fax: (936) 494-3438
Email: lsgcd@consolidated.net Web Site: www.lonestargcd.org

APPLICATION FOR ADDRESS CHANGE

Instructions: Complete form, type or print. This application is used to request an address change for a current well owner or a well address which has been changed by an approved addressing agency. Additional information or explanations may be attached. Note: This form should not be used to transfer ownership of permit, see Application to Amend - Permit Transfer form.

OWNER ADDRESS CHANGE WELL ADDRESS CHANGE (due to re-addressing by approved agency)

Date: _____

-This form may be faxed or mailed-

Current Permit Information: *Required for both changes*

Well Owner: _____ Permit No. _____

Mailing Address: _____

City: _____ State: _____ Zip: _____

Owner Address Change Information:

New Permit mailing address: _____

Contact: _____

City: _____ State: _____ Zip: _____

Phone: _____ Fax: _____

New Billing mailing address: _____

Contact: _____

City: _____ State: _____ Zip: _____

Phone: _____ Fax: _____

Reason for Change: _____

Well Owner _____

Well Address Change Information

Current Well Address on Permit: _____
City: _____ State: TX Zip: _____
New Well Address: _____
City: _____ State: TX Zip: _____
Address changed by _____ addressing agency.

Authorized Representative:

_____ **Print Name** _____ **Signature** _____ **Date**

District to Complete	
Status:	<input type="checkbox"/> Entered in QB _____ <input type="checkbox"/> Entered in Access _____ <input type="checkbox"/> Application Updated _____
Received by	_____ Date _____

