

Enrollment Form: Receive Bills via Email

Name(s) on Account:	
Service Address:	
Telephone Number:	
Email Address:	
Account Number:	
By completing this enrollment	form, you are choosing to receive your East Windsor Municipal Utility
Authority (EWMUA) billing state Mail	ements via email and will not be receiving printed statements via U.S.
You have the ability to withdra	aw your consent at any time by contacting EWMUA at 609-443-6000
 The EWMUA will email your sta 	tement to the email address you provide
 You may also view your utility View Bill or Pay Online) 	bill online at https://eastwindsormua.com/ (Billing > Pay Your Bill >
• In order to ensure that we are	able to provide you with accurate billing information, you must
update us with any change in y	our email address
 All bill statements received via your records 	a email can be printed and saved electronically to your computer for
 If you use spam filters for email list 	ils, please add <u>noreply@eastwindsormua.com</u> to your approved senders
By signing below, I authorize the EWM	UA to send utility bills for this account to my email address.
Signature:	Date:
Please mail the completed form to:	EWMUA
	7 Wiltshire Dr
	East Windsor, NJ 08520

Please email the completed form to: accountsreceivable@eastwindsormua.com

OR