

Tracey L. Gregoire
Tax Collector

CITY OF MILLVILLE



TAX AND UTILITY DEPARTMENT

PO BOX 609 12 S HIGH STREET MILLVILLE NJ 08332

TELEPHONE: 856-825-7000

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www.millvillenj.gov

Office Staff

Ashley Martinez

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Christina Jones

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(Please print clearly. Illegible submissions will NOT be processed and will be returned to you)

E-BILLING AUTHORIZATION FORM

Account #: _____

Name: _____

Service Location: _____

Home Phone: _____ Cell Phone: _____

Email Address: _____

E-Bill Approval

I, the owner/tenant of the above property service address, authorize the City of Millville to initiate electronic utility bills via email for the account listed above. I acknowledge that it is my responsibility to notify the City of Millville Tax and Utility Collection Department of any changes in the email address. Failure to receive a statement or update an email address does not exempt me from the responsibility of making payment. I understand by approving this service I will no longer receive a mailed paper statement.

Owner's/Tenant's signature _____ **Date** _____

Return completed form to:

City of Millville Tax & Utility Department
12 S High St
Millville, NJ 08332
Email to:
Fax: 856-293-0732