



Synergy Utility Billing LLC Move In / Move Out Form

Please be sure to fill out all the information for any move ins and move outs within your building, as applicable.

Please note: For a unit transfer, please provide old apartment # in addition to the new apartment #.

A move-out/move-in reading is required for all submetered utilities, as applicable.

Please select one: Move In Move Out Transfer Update CARE Status

Move in/out date _____

Name of apt. complex _____

Apt #/Unit Address: _____

New apt. # (for transfers) _____

Resident Name _____

PM Resident ID _____

Bill Delivery Options: Paperless eBill Paper bill only

Email Address _____

Mailing address/forwarding address (if different than Service Address):

Move in/out date _____

Name of apt. complex _____

Apt #/Unit Address: _____

New apt. # (for transfers) _____

ELECTRIC

Move in/out reading _____

New reading (for transfers) _____

Select one: CARE Electric Standard Electric

GAS

Move in/out reading _____

New reading (for transfers) _____

Select one: CARE Gas Standard Gas

WATER

Move in/out reading _____

New reading (for transfers) _____