



Consumer Information Update Request Form

Today's Date: _____

Meter Number: (Required): _____ Account Number: _____

Primary Account Holder: _____
First Name: _____ Last Name: _____ Middle Initial: _____

SOCIAL Security Number (Required) * Please provide VERBAL or On a piece of paper – to be returned to you.

DRIVERS LIC/ID No. (Required): _____ STATE: _____

OTHER FORM OF ID: _____

Secondary Account Holder: _____
First Name: _____ Last Name: _____ Middle Initial: _____

Relationship to Primary Acct. Holder: _____

When adding/changing secondary name on an account you must wait until your next bill is processed to obtain a copy of the change.
Maximum of 2 additional names may be added to your account. You are allowed 2 name changes within a 12-month period.

Physical Address: _____

Mailing Address: _____

City: _____ State: _____ Zip Code: _____

Phone Number (s): _____

Home: _____ Work: _____

Cell Phone: _____ Cell Phone Provider: _____

Cell Phone: _____ Cell Phone Provider: _____

E-MAIL ADDRESS: _____

ALERTS & REMINDERS:

- Please indicate by checking the ones you would like to be sent to you via: _____ Cell Text and/or _____ E-Mail message

____ Outage Notifications ____ Due Date Reminder ____ Past Due Reminder ____ Acct Profile Changes ____ Pmt. Confirmation
(Ask for other Alerts and Reminders available - OR - visit our website @ www.jemezcoop.org for more options)

Check here for: _____ Auto-Draft _____ Credit Card Draft _____ E-Check _____ E-Bill Statements

(You will be referred to the Billing Department to set your account(s) up for the ones you have checked off).

Primary - SIGNATURE: _____

Secondary - SIGNATURE: _____

JMEC PHONE NUMBER(s) Espanola Office: 505-753-2105
Toll Free: 1-888-755-2105

Cuba Office: 575-289-3241
Payment Line: 1-855-479-3686

Jemez Springs Office: 575-289-3550

Revised: C. Mtz 06/30/26