

Brunswick Regional



Water and Sewer

PUBLIC INFORMATION REQUEST

Inquiry Date: _____

Entity/Contact Name: _____

Address: _____

City: _____ State: _____ Zip: _____

Phone: _____

Email: _____

Information Requested: _____

***** INTERNAL USE ONLY *****

Request Taken By: _____
Name Title Date

Request Completed By: _____
Name Title Date

Comments: _____

Please allow a minimum of 48-72 hours for your request to be processed.

Headquarters Address
516 Village Road, NE Leland, NC 28451
Office: 910-371-9949

Mailing Address
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Fax: 910-371-6441