



# End Water Service Application

To close an account, we require 2 working days to cancel your service. It is your responsibility to request that your account be closed. Closing reads will be issued on the next business day. Refunds and final bills will be issued within 30 days of the closing read.

## Service Information

Service Address: \_\_\_\_\_

Service Disconnection Date Requested: \_\_\_\_\_

## Customer Information:

Name On Bill: \_\_\_\_\_

Contact Name: \_\_\_\_\_

Phone Number: \_\_\_\_\_

E-mail Address: \_\_\_\_\_

## Forwarding Address

Please provide your current mailing address to ensure you receive your final bill and/or a refund check.

Street Address or PO Box: \_\_\_\_\_

City, State & Zip Code: \_\_\_\_\_

## Owners/Tenants Responsibility

I understand I am responsible for any unpaid debts that may accrue through the use of the District water consumed on the property up to the date of disconnection. I acknowledge and agree that a lien may be placed on the property should these debts remain unpaid. If I am renting or leasing at said property at the time of disconnection the current owner will be notified.

Print Name: \_\_\_\_\_

Applicant Signature: \_\_\_\_\_

Date Signed: \_\_\_\_\_