2.

INSTRUCTIONS

1.

Complete this form.	Include a copy of your driver's license.	Mail, fax, or bring in the completed form to City Hall.
CUSTOMER INFORMA	TION	
Today's Date:	Current Wate	er Account No.:
Name:		
Driver's License No.:		
Disconnecting Address:		
REQUEST DATE FOR DISCONNECTION:		
Forward Mailing Address:		
Phone Number:	Cell Phone Nu	ımber:
I am aware that there will I deposit will be applied to n	pe a service charge for disconnection on the service charge for disconnection of the service charge for the serv	of water service, and that my
		Signature

3.