



Utility Account Closure Request

Current Address

Name _____

Service
Address _____

Cell Phone _____ Final Read: _____

OWN/RENT? _____

If rental,
name of
landlord _____

Forwarding Information

Address _____

City, State _____

Last Date of Service _____

FOR OFFICE USE ONLY:

_____ Final Reading Requested Date: _____

_____ Account Closed / Deposit Applied

_____ Was service left on?

_____ Has new account been applied for?