



REQUEST FOR TEMPORARY DISCONNECTION OF WATER SERVICE

NAME (Please Print) _____

SERVICE LOCATION _____

DATE OF DISCONNECTION REQUESTED _____

TEMPORARY MAILING ADDRESS _____

In signing this form I understand and agree to the following terms and conditions:

- ❖ The water meter will be locked.
- ❖ Disconnects will be done during regular working hours only.
- ❖ Bills will be pro-rated for water and sewer for partial months.
- ❖ Storm Drain charges will continue to be billed.
- ❖ A **\$25.00** reconnection fee will be charged to my account.
- ❖ My account must be current and/or paid in full before my water meter will be unlocked.
- ❖ Someone must be present at the home for reconnection.
- ❖ A tamper fee of \$310.00 will be charged to any account where there appears someone attempts to turn the water back on themselves.

Signature _____ Date _____

Office Use: Account # _____

Charged Recon Fee

Meter # _____