

**TARKINGTON SPECIAL UTILITY DISTRICT
CUSTOMER REQUEST FOR SERVICE DISCONTINUANCE**

I, (Account Name) _____, hereby request that my water or sewer service account number _____ located at _____, be disconnected from service on (date) _____ 20__ and that my deposit be refunded (or final bill) mailed to _____.

I understand that if I should ever want my service reinstated I may have to reapply for service as a new customer and I may have to pay all costs as indicated in the re-service provisions in the current copy of the District Service Policy.

Charges for water or sewer service will terminate when this signed statement is received by the District office. I understand and agree that final water, sewer and service trip charges will be deducted from the deposit.

If applicable, I further represent to the District that my spouse joins me in this request, and I am authorized to execute this Request for Service Discontinuance on behalf of my spouse as a joint owner of the aforementioned property.

Signature

Date

Commercial Accounts Only

I further represent to the District that I am the duly authorized representative of (Business Name) _____ and have full authority to execute this Request for Service Discontinuance on behalf of said business.

Signature

Date