



APPLICATION TO DISCONTINUE SERVICES
All information is required in order to close out service.

Name: _____ Phone: _____

Date Submitted: _____ Shut Off Date: _____

Service Address: _____ Account Number: _____

Reason for Discontinuing Services: _____

Forwarding Address: _____

_____ Upon receipt of such notice the Camino Real Regional Utility Authority will read the meter within a reasonable period of time or approximately five working days.

_____ The account is subject to the minimal fixed charge up to the time of the final meter reading.

_____ I understand that I am responsible for any and all charges on the account.

_____ I understand that upon generation of final charges CRRUA will automatically apply the water deposit against outstanding and final bill charges. Any deposit balance left on the account after all CRRUA charges are covered will be paid via check and mailed to the forwarding address provided.

_____ Please allow six to eight weeks after shut-off date for processing of refund/final bill.

I certify the information provided in this application is true and correct and that I have read and understood the above policies and procedures:

Property Owner's/ Occupant Signature

CRRUA Authorized Signature

Date

Date

For office use only: Work order generated on: _____ Number: _____

Account review completed on: _____ Issues: _____

Deposit applied to account on: _____ Credit/Deposit due: _____ Posted to refund check log: _____

Processed by: _____ Date: _____ Reviewed by: _____ Date: _____