



# VILLAGE OF INDIANTOWN WATER & WASTEWATER UTILITY REQUEST PERMANENT DISCONNECTION



*This form will be given to the Account Holder requesting the services to be disconnected. If the customer makes the request over the phone, this form will be mailed to the forwarding address or emailed to the email address to on file.*

Requested Turn Off Date: \_\_\_\_\_ Account Number: \_\_\_\_\_

Applicant Name: \_\_\_\_\_

Service Address: \_\_\_\_\_

Requestor's Name: \_\_\_\_\_

Forwarding Address: \_\_\_\_\_

Email Address: \_\_\_\_\_

Signature: \_\_\_\_\_ Date: \_\_\_\_\_

If you have any questions regarding this process, please contact Utility Billing at 772-597-2121.

## OFFICE USE ONLY

Is there a remaining deposit?  Yes  No If yes, what is the amount? \_\_\_\_\_

Is there a current balance?  Yes  No If yes, what is the amount? \_\_\_\_\_

Please note that if there are any balances unpaid on the account and there is a deposit on file, the balance will be deducted from the deposit. If a customer has more than one service address on the account, the remaining deposit will be applied to the account in the form of a credit. If a customer is in between billing cycles during the request for disconnection, there will be a final bill calculating any usage and the base rate will be prorated from the first date of the last billing cycle to the date of disconnection.

Utility Billing Clerk