



CUSTOMER REQUEST FOR CHANGE IN UTILITY SERVICE

Date of Request: _____ Account #: _____

Name: _____ Phone #: _____

Mailing Address: _____

Street Address: _____

CHANGE IN SERVICE

+ *Increase* Water/Sewer units to: _____

- *Decrease* Water/Sewer units to: _____

GARBAGE SERVICE

+ *Increase* (change to) ___ cans _____ x a week / ___ dumpsters _____ x a week

- *Decrease* (change to) ___ cans _____ x a week / ___ dumpsters _____ x a week

RECONNECT SERVICE _____ (\$25 Fee Applies)

DISCONNECT SERVICE _____

Customer's Signature _____

For Office Use Only

Account Deposit: Applied _____ / Refunded _____

DATE _____ TIME _____

METER READING _____

INITIALS _____