

K'awaika Hanu Internet Request to Disconnect Internet Service Form

KITI ACCOUNT NO.						
Full Name OR Company Name: _						
Mailing Address	City		State	Zip		
Home Phone	Cellphone		Message Ph	Message Phone		
Email Address		Alternate Er	nail Address			
Service Address (if different from ma	iling address):					
Address (include house #)	City		State	Zip		
Type of Disconnection: Please se	lect one option.					
☐ Temporary Disconnecti	on – internet servic	e can be disconr	nected up to 90) days		
Disconnection Date:		Reconnec	Reconnection Date:			
☐ Permanent Disconnect	ion – internet equip assessed	ment will be pick	ed up and disc	connection fee w	ill be	
Reason for Disconnection: Please	check all that appl	y.				
☐ Financial		☐ Internet Service*				
☐ Computer Issues		□ Compe	☐ Competitor			
□ Not Using		☐ Other*				
*Please explain.						
By signing the Request to Disconand current and that I have the au K'awaika Hanu Internet changes i	thority to request f	or changes as inc	dicated on this	form further agr	ee to have	
Signature:			Date:			