

FOR OFFICE USE ONLY		
Account Number:		
Deposit Amount:		
Final Reading:		
Deposit Mailed:		

# CLOSE ACCOUNT

DATE: \_\_\_\_\_ ACCOUNT NUMBER: \_\_\_\_\_

NAME ON ACCOUNT: \_\_\_\_\_

ADDRESS TO BE CUT OFF: \_\_\_\_\_

TELEPHONE NO: (     ) \_\_\_\_\_

FINAL BILL OR REFUND ADDRESS: \_\_\_\_\_

\_\_\_\_\_

TELEPHONE NO: (     ) \_\_\_\_\_

REASON FOR MOVING: \_\_\_\_\_

DAY OF FINAL SERVICE: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_  
Customer Signature

Customer called in; no signature available

\_\_\_\_\_  
Office Personnel