

## APPLICATION FOR DISCONNECTION OF UTILITIES

NAME OF OWNER: \_\_\_\_\_

MAILING ADDRESS: \_\_\_\_\_

EMAIL ADDRESS: \_\_\_\_\_

CIVIC ADDRESS: \_\_\_\_\_ LEGAL: PLAN \_\_\_\_\_ BLOCK \_\_\_\_\_ LOT \_\_\_\_\_

PHONE (HOME): \_\_\_\_\_ WORK \_\_\_\_\_

FORWARDING ADDRESS: \_\_\_\_\_

DATE OF APPLICATION

DAY \_\_\_\_\_ MONTH \_\_\_\_\_ YEAR \_\_\_\_\_

TURN OFF DATE

DAY \_\_\_\_\_ MONTH \_\_\_\_\_ YEAR \_\_\_\_\_

SIGNED BY OWNER \_\_\_\_\_

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### OFFICE USE:

GL # \_\_\_\_\_

METER READING: \_\_\_\_\_

ROLL NUMBER: \_\_\_\_\_

OVERRIDE: WATER \_\_\_\_\_

SEWER \_\_\_\_\_

REFUSE \_\_\_\_\_

RECYCLING \_\_\_\_\_

APPROVED BY: \_\_\_\_\_