

WALKER COUNTY SPECIAL UTILITY DISTRICT

REQUEST FOR SERVICE DISCONTINUANCE

I, _____ hereby request that my water service located at _____, be disconnected by Walker County Special Utility District. I understand that if I should ever want my service reinstated I will have to reapply for service as a new customer and I will have to pay all costs as indicated in a current copy of the Walker County Special Utility District Rules and Regulations. Future ability to provide service will be dependent upon system capacity, which I understand may be limited and may require capital improvements to deliver adequate service. I also understand that these improvements will be at my cost. I further represent to the District that my spouse joins me in this request and I am authorized to execute this Request for Service Discontinuance on behalf of my spouse.

Signature

Date of Signature

WCSUD Representative:

Account # _____

Forwarding Address:

Name _____

Address _____

City, State, Zip code _____

Phone number _____

Disconnect Date Requested _____

Accepted by WCSUD Representative _____