

REQUEST FOR SERVICE TERMINATION

DATE _____

NAME _____

ADDRESS _____

PHONE _____

DATE TO DISCONNECT _____

FORWARDING ADDRESS

BY SIGNING BELOW, I AUTHORIZE THE CITY OF LORENA TO DISCONNECT MY UTILITY SERVICES. ALSO, I UNDERSTAND THAT THE CITY OF LORENA GARBAGE CANISTER IS CITY PROPERTY AND IS TO BE LEFT ON PREMISES WHEN I VACATE THE PROPERTY. IF THE CANISTER IS LOST, STOLEN, OR MISSING, I UNDERSTAND THAT MY ACCOUNT IS SUBJECT TO CHARGES FOR THE COST OF THE CANISTER.

SIGNATURE _____