

Elmendorf Water System

P.O. Box 247 • Elmendorf, TX 78112

Office: (210) 635-8210

Fax: (210) 635-8221



Termination of Service

Name: _____
Last First M.I.

Service Address: _____
Street Address Apartment/Unit #

Account #: _____ **DESIRE DATE TO END SERVICE:** _____

Which services do you want terminated? Water Garbage Do you wish to terminate service permanently? Yes No

Forwarding Address: _____
Street Address Apartment/Unit #

City State ZIP Code

Phone #: _____ Email Address: _____

If you are not the owner or the name of the person on the water bill, it is necessary for you to provide something in writing requesting termination of service. Only the owner or the person on the water bill can request termination of service.

Please empty the trash/recyclables from your bins and leave them outside of your property. If these bins are not empty, they will be disposed of by the City of Elmendorf and you will be prorated accordingly to your final bill.

“I, hereby certify the cancellation of my utility services with the City of Elmendorf. By signing this request for termination, I meet all requirements to make this request at the address above.”

By signing this request, I meet all requirements to make this request of termination of service at the address above.

Signature

Date

Office Use Only	
DATE RECEIVED:	BY:
DATE OF SHUTOFF:	BY:
DATE OF TOTES PICKUP:	BY:
DATE OF FINAL BILL:	BY:

www.elmendorf-tx.com

This institution is an equal opportunity provider and employer.

