

**CITY OF YUMA
APPLICATION FOR DISCONTINUANCE OF UTILITY SERVICE
P O BOX 265/910 SOUTH MAIN
YUMA CO 80759
(970) 848-3878 OPTION #1**

APPLICANT: _____

OWNER (IF NOT APPLICANT): _____

SERVICE ADDRESS: _____

NEW MAILING ADDRESS: _____

CITY, STATE, ZIP: _____

HOME PHONE: _____

CELL PHONE: _____

WORK PHONE: _____

DATE OF BIRTH: _____

SERVICES TO END: ELECTRIC WATER SEWER TRASH

CIRCLE ONE: RENTED SOLD/SELLING OWNER/LANDLORD

DATE TO END SERVICE: _____

I AM HEREBY REQUESTING TO DISCONTINUE THE SERVICES SUPPLIED TO ME AT THE ABOVE ADDRESS. I AGREE THAT I AM FULLY RESPONSIBLE FOR THE FINAL BILLING. I UNDERSTAND MY DEPOSIT WILL BE APPLIED TO MY FINAL BILLING AT THE ABOVE ADDRESS, UNLESS I AM REQUESTING SERVICE AT ANOTHER LOCATION, IN WHICH CASE MY DEPOSIT WILL TRANSFER TO MY NEW ADDRESS. IN THE EVENT COLLECTION OF UNPAID BALANCES IS NECESSARY, THE CONSUMER IS RESPONSIBLE FOR THE COSTS OF COLLECTION, INCLUDING, BUT NOT LIMITED TO, DISCONNECTION AND RECONNECTION FEES AND REASONABLE ATTORNEY FEES AND COSTS, OR PENALTIES ASSESSED.

SIGNATURE OF APPLICANT: _____

DATE: _____

OFFICE USE ONLY

UTILITY ACCOUNT NUMBER: _____

DEPOSIT AMOUNT: _____ REFUND: _____ YES _____ NO

TRANSFER TO ACCOUNT NUMBER: _____

REVISED 8/2018