



Town of Pulaski
PO Box 660
Pulaski VA 24301
Ph:540-994-8640/41
Fax:540-994-8647
Finance@pulaskitown.org

UTILITY SERVICE TERMINATION FORM

BILLING OF FIXED CHARGES WILL NOT CEASE UNTIL THIS FORM IS COMPLETED AND RETURNED TO OUR OFFICE.

INSTRUCTIONS: The town requires all persons or entities having a right of possession to the premises to sign as account holder. Where premises are occupied by someone other than the owner, the account holder is responsible for authorizing disconnection.

DATE: _____

SERVICE CUSTOMER AND LOCATION INFORMATION

Utility Customer Name _____
Account Number _____

Street Address _____

DISCONNECTION DATE: Please disconnect the utility service at the above location on

Certification:
I UNDERSTAND THAT AS ACCOUNT HOLDER, OWNER, OR OCCUPANT OF THE PREMISES I AM RESPONSIBLE FOR THE UTILITY CHARGES OF THE ABOVE ACCOUNT UNTIL THE TIME OF DISCONNECTION.

_____ BY SIGNING BELOW, I VERIFY THAT I AM NOT DISCONNECTING WATER AS A MEANS TO EVICT OR PLACE UNDUE HARDSHIP ON A CURRENT TENANT.

_____ If moving to another address serviced by the Town, my current balance will be transferred immediately and will be due by the due date of the original bill. The final bill amount will be transferred to the new account if not paid by the due date.

Utility Customer Signature

MUST BE COMPLETED
***Forwarding mailing address _____

Cashier Signature: _____