

Request for Service Disconnection – Commercial User

Please complete the form below to have your service disconnected on at an established commercial account. This form must be submitted at least 24 hours prior to when you would like service disconnected at your commercial account. Services are disconnected Monday thru Friday.

*** Required Information**

Account Name:

Name of Business (must match EIN/Federal ID number)	d/b/a, if applicable	
*	*	

Contact Name:

Last	First	Middle Initial
*	*	

Social Security Number/EIN/Federal ID Number

*

Service Address to Disconnect:

Apartment Complex Name (if applicable)	
Street Address	*
Unit Number or Apartment Number (if applicable)	
City/State	*
Zip	*
E-Mail Address	*
Preferred Disconnect Date	*

Mailing Address for Final Bill and/or Refund Check (if applicable)

Apartment Complex Name (if applicable)	
Street Address	*
Unit Number or Apartment Number (if applicable)	
City/State	*
Zip	*
E-Mail Address	*

