



WATER SERVICE DISCONNECTION REQUEST

DRA-DEVS 00006 05/07/2017

I hereby make application for the water service at the location below to be disconnected.

APPLICANT:	TELEPHONE:
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ADDRESS:

RELATIONSHIP TO OWNER:

LOCATION:

METER NO:	SIZE:
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DISCONNECTION FEES	<input type="checkbox"/>	(20mm = \$179.00)	\$ _____
Please tick the service size required to be disconnected.	<input type="checkbox"/>	(25mm = \$189.00)	\$ _____
	<input type="checkbox"/>	(40mm = \$219.00)	\$ _____
	<input type="checkbox"/>	(50mm = \$331.00)	\$ _____
	<input type="checkbox"/>	(> 50mm = quote)	\$ _____

SIGNATURE:	Work will be scheduled from the date of receiving payment of fees.
DATE:	

INTERNAL USE ONLY

RECEIPT DETAILS: Receipt No:	Date:	Amount:	Cashier:
WORK ORDER NUMBER:			
ASSESSMENT NUMBER:			