

City of Ruthven
TERMINATION OF SERVICES FORM

Today's Date: _____ **End Service Date:** _____

Name: _____ ***Physical Address:** _____

***Forwarding Address:** _____

Phone: Home: _____ **Cell:** _____ **Work:** _____

Email: _____ **SS#** _____

HOMEOWNERS Please provide information about the status of the property:

Sold: Closing date _____ New Owner (name & phone) _____

Rented: Rent date _____ Renter (name & phone) _____

Other: _____

Your final bill will be mailed to your forwarding address.

Utility Deposit: Homeowners' deposits are refunded after one year of consecutive on-time payments. If your deposit was not previously refunded, it will be applied to your account when your final bill is issued. If there is a credit on your account after the deposit is applied, a check will be mailed to your forwarding address.

RENTERS Utility Deposit: \$100.00 per water meter. Renters' deposits are held until you move out.

The utility deposit will be applied to your account when your final bill is issued. We will mail your final bill to your forwarding address. If there is a credit on your account after the deposit is applied, a check will be mailed to your forwarding address.

Landlord's Name: _____

Contact Information: _____

Resident Signature: _____ **Date** _____

FOR OFFICE USE ONLY: ACCOUNT NUMBER: _____ **FINAL DATE:** _____

WORK TO PERFORM:	READ OUT/IN	SHUT OFF/READ FINAL
METER READING:		

ADDRESS: _____ **METER#** _____ **DATE:** _____

FINAL READING: _____ **COMPLETED BY:** _____

DEPOSITS: Deposit on file: \$ _____ **Deposit amount applied to final bill: \$** _____

Deposit refund: \$ _____ **Refund Check #** _____ **Refund Check Date:** _____

ACH ACCOUNTS

Date of final ACH withdrawal: _____ **Date removed from ACH listing:** _____