

# SERVICE DISCONNECT REQUEST

Morrison Public Works Authority

Account Name \_\_\_\_\_ Acct # \_\_\_\_\_

Location/Street \_\_\_\_\_

Mailing Address \_\_\_\_\_

Employment \_\_\_\_\_

Social Sec # \_\_\_\_\_

Drivers Lic # \_\_\_\_\_

Forwarding Address \_\_\_\_\_

I hereby request that water service at the above location be terminated and shut off on \_\_\_\_\_.

\_\_\_\_\_  
Applicant

\_\_\_\_\_  
Date