

UTILITY SERVICES DISCONNECT or TERMINATION APPLICATION HILDALE / COLORADO CITY UTILITY DEPARTMENTS 320 EAST NEWEL AVENUE, P.O. BOX 840490 HILDALE, UT 84784-0490 PH# (435) 874-1160

Customer Name:		Phone:	
Account #		Date:	
Driver's License:		SSN:	
-	State License #		
If Business, Business	Name	Busine	ess Tax ID:
Service Address Info	ormation:		
Street Address	A	pt # or Lot #	
City		tate Zip	<u> </u>
Requested Service:	Disconnect: Water	·	minate: Water
	Wastewater Gas		Wastewater Gas
			SAGE ON THIS ACCOUNT. THIS AL BILLS WILL ACRUE PENALTY
Final Bill Mailing Ad	dress:		
Street Address		Apt # or Lot #	
City		State Zip	
Signature:			
<u>Signature:</u>			
)nlv		For Office Use Only
Signature: ty Department Use Cervice Order Created	Only Landfill Papers Completed	Court Monitor Form Compl	For Office Use Only Deposit Transferred
ty Department Use C ervice Order Created	Landfill Papers Completed	Court Monitor Form Compl	•
ty Department Use C		Court Monitor Form Compl	Deposit Transferred Deposit Applied
ty Department Use Cervice Order Created	Landfill Papers Completed	Court Monitor Form Compl	Deposit Transferred