



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

Customer Name _____ Phone: (____) _____ - _____

Account # _____ **Date:** _____

Birth Date: ____/____/____

Driver's License: _____ SSN: _____ - _____ - _____
State License Number

If Business, Business Name: _____ Business Tax ID _____

Service Address Information:

Street Address Apt # or Lot #

City State Zip

<p>For Office Use Only</p> <input type="checkbox"/> Deposit Transferred <input type="checkbox"/> Deposit Applied <input type="checkbox"/> Deposit Refunded

Requested Service: Disconnect Terminate

<input type="checkbox"/> Water	<input type="checkbox"/> Water
<input type="checkbox"/> Wastewater	<input type="checkbox"/> Wastewater
<input type="checkbox"/> Gas	<input type="checkbox"/> Gas

Date Service to be Done: _____

Signature: _____

<p>Utility Department Use Only</p> <input type="checkbox"/> Service Order Created <input type="checkbox"/> Landfill Papers Completed Processed by _____ Date _____ Notes _____ _____ _____ _____ _____ _____	<p align="right">Account Number _____</p>
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