



303 W. Main St., Kenedy, Texas 78119

Phone (830) 583.2230 Fax (830) 583.2063

UTILITY SERVICE TERMINATION FORM

Account Number: ___ ___ - ___ ___ ___ - ___ ___

Name on Account: _____

Service Address: _____

Termination Date: _____

Forwarding Address: _____

City: _____ State: _____ Zip: _____

- Hold Deposit on Account: _____ Yes
Final Bill must be paid in full or your deposit will be applied to your account
- Account may be changed into the name of _____
and my deposit will be forfeited to new account holder. A new application for services
will be required by new account holder.

Signature

Date

Contact Phone Number: _____

OFFICE USE ONLY

Employee Name:
Date Received: