

WATER SERVICE DISCONNECT REQUEST

Account Number: _____
Customer Number: _____
Name (exactly as on Water Bill): _____
Address of Water Service To Be Disconnected: _____
City: _____
Telephone Number: _____
Last Four Digits of Social Security # (for verification): _____
If Commercial Customer, Federal Tax ID: _____
Date of Desired Water Service Cutoff: _____

➔ **SIGNATURE:** _____

Forwarding Address	
Street: _____	
City: _____	
State: _____	Zip Code: _____

Fax, mail, or deliver this form to the East Bank Water Department office. You may contact the office to verify that it has been received.

East Bank Office
Jefferson Parish Department of Water
1221 Elmwood Park Blvd, Ste 103
Jefferson, LA 70123

Fax: 504-736-6093
Phone: 504-736-6060