

City of Erin
P.O. Box 270
Erin, TN 37061
Fax: 931-289-5436

DISCONTINUE SERVICE AGREEMENT

****Provide copy of current state issued ID when returning****

NAME: _____

ACCOUNT NUMBER: _____

SERVICE ADDRESS: STREET _____

CITY _____

STATE _____ ZIP CODE _____

FORWARDING ADDRESS: STREET _____

CITY _____

STATE _____ ZIP CODE _____

DATE SERVICE IS TO BE DISCONTINUED
MONTH _____ DAY _____ YEAR _____

Any unpaid balances will be taken from your meter deposit. The remaining balance will be mailed to you approximately 2 weeks after you receive your final bill.

The billing cycle is from the 15th to the 15th of each month, you will be billed on the 1st of the following month for water used during that period.

If deposit is to be transferred to a new account your current account must be paid in full before any deposit can be transferred.

Deposit transfer to account # _____

SERVICE ADDRESS: STREET _____

CITY _____

STATE _____ ZIP CODE _____

SIGNED: _____

DATE: _____

PHONE NUMBER: _____