

## Westwood Shores M.U.D

75 Cottonwood Trinity, TX 75862

## REQUEST FOR TERMINATION OF SERVICE

| Customer Name:  |   |
|---|---|
| Service Address:  |   |
| Home Phone: Ce  | ell Phone:  |
| Customer Account #  |   |
| I hereby wish to terminate water and                                    | I sewer service.  |
| Date service is to be discontinued:                                     |   |
| Monday – Friday Only, before 3pm  |   |
| List the address to mail final bill and/                                | or deposit refund as applicable.                              |
|   |   |
|   |   |
| <b>Note</b> : Your Utility deposit will be app bill for the difference. | lied against your final bill, and you will receive a refund o |
| L hereby certify that the above inform                                  | nation is true and accurate. (Signature)                      |
| Thereby certify that the above inform                                   | iation is true and accurate. (Signature)                      |
| Printed Name  | <br>Date  |

Fax: 936-594-0408

www.westwoodshoresmud.com