

Disconnect Water Service

Public Water Supply DIST. #1 5435 Tower Drive Battlefield, MO 65619

Account Number:			
Customer Name:			
Service Address:			
Phone Number:			
Last date of service:			
Homeowner: Yes No			
Rental Property: Yes No			
Rental Property Owner Name:			***************************************
Rental Property Phone Number:			
Forwarding Address: Street Name:			
City:			
 ✓ Any Deposit given at the time PWSD #1 for water usage serv ✓ Any remaining balance will be 	vice.		
In the event that Customer fails to p undersigned) agree(s) to pay costs o agency charges, attorney fees, court the district.	of collection, incl	uding but not limite	ed to all collection
Signature of Applicant:			Date: