Mt Zion Water Supply Corporation

P. O. Box 2034 Rockwall, Texas 75087 (469) 377-1399

REQUEST FOR SERVICE DISCONTINUANCE

Complete the form and email as an attachment to help@mtzionwater.com

Date:	Account #:		
Customer(s):			
Service Address: _			
Closing Date:			
system. To reinstar customer and pay If the following ap	te service at this address, I ackno the associated fees as stated in N	wledge that I will be requi Mt Zion Water Supply's rat rther represent to Mt Zior	Water Supply that my spouse joins me in
Forwarding addre			
(Address)			
(City) (State) (Zip)			
(Phone Number)			
Customer Signatur	e:	Customer Signature:	

Notice: Charges for service to this account will terminate on the date service is disconnected by Mt Zion Water Supply. Service will be disconnected within 48 hours of the date this completed and signed form is received by Mt Zion Water Supply, unless you enter a subsequent disconnection date in the space provided above.