

In Office Use:  
Application Received by \_\_\_\_\_  
Date Received \_\_\_\_\_  
Lock order made \_\_\_\_\_

## Madison County Water Department Request to Terminate Service

Are you moving out of the Madison County Water Service Area? If so, please complete this form and return it to our office either in person, by mail or email.\*

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Service Address Moving From: \_\_\_\_\_

Effective Date: \_\_\_\_\_

First Name: \_\_\_\_\_ Middle Initial: \_\_\_\_\_ Last Name: \_\_\_\_\_

Are you the owner or tenant of this property? \_\_\_\_\_

Future Mailing Address: \_\_\_\_\_  
\_\_\_\_\_

Date of Birth: \_\_\_\_\_

Driver's License or State ID Number: \_\_\_\_\_ State: \_\_\_\_\_

Cell Phone: \_\_\_\_\_

Home Phone: \_\_\_\_\_

Work Phone: \_\_\_\_\_

Cell Phone: \_\_\_\_\_

Email Address: \_\_\_\_\_

Signature: \_\_\_\_\_ Date: \_\_\_\_\_

\*If mailing or emailing in this form, please include a copy of your ID.