



City of Crandall
PO Box 277
110 S. Main St.
Crandall, TX 75114

WATER UTILITY DISCONNECTION REQUEST

TODAY'S DATE: _____ DATE TO DISCONNECT: _____

(Business Day)

SERVICE ADDRESS: _____

FORWARDING ADDRESS: _____

NAME: _____

(First)

(Middle)

(Last)

Customer Signature: _____

PLEASE SUBMIT REQUEST TO:

972-472-6601 FAX

OR

BTAYLOR@CRANDALLTEXAS.COM

FOR CITY USE ONLY

Account # _____

Meter # _____ Bar Code # _____