

WICKSON CREEK SPECIAL UTILITY DISTRICT

**P O BOX 4756
BRYAN TEXAS 77805
PHONE: 979-589-3030
FAX: 979-589-3275**

REQUEST FOR SERVICE DISCONTINUANCE

I, _____, hereby request that the water meter for account number _____ located at _____, be disconnected from Wickson Creek SUD service on the ____ day of _____, 20____, and that my deposit be refunded to me. I understand that if I should ever want my service reinstated I will have to reapply for service as a new customer and I will have to pay all costs as indicated in a current copy of the Wickson Creek SUD Order Setting Water Service Rates and Fees. Future ability to deliver service will be dependent upon system capacity, which I understand may be limited and may require capital improvements necessary to deliver adequate service. I also understand that these improvements will be at my cost.

Signature: _____

Date: _____

Forwarding Address for Final Bill and Deposit Refund:

Email: _____

Phone: _____