

CITY OF SANTA MONICA  
WATER RESOURCES DIVISION  
1212 5<sup>TH</sup> STREET, 3<sup>RD</sup> FLOOR  
SANTA MONICA, CA 90401  
310 458-8224  
310 656-9175 FAX  
OFFICE HOURS: M-TH: 7:30 AM – 5:30 PM  
FRIDAY: 8:00 AM – 5:00 PM



### DISCONTINUANCE OF WATER, SEWER, & REFUSE SERVICE

*I hereby authorize the City of Santa Monica Water Resources Division to discontinue the billing for water service in my name. I understand that service will be discontinued only during normal business hours.*

NAME: \_\_\_\_\_

ACCOUNT NO: \_\_\_\_\_  
Water                      Fire                      Irrigation                      Landscape                      Ind. Waste

SERVICE ADD: \_\_\_\_\_  
(As it appears on your bill) Street Number                      Street Name                      Suite/Apt./Unit No.

REQUESTED DATE\*\*  
CLOSING ACCOUNT: (MONTH:\_\_\_\_\_)(DAY\_\_\_\_\_)(YEAR\_\_\_\_\_)  
\*\*\*CLOSING READ MAY OCCUR NEXT BUSINESS DAY (WEEKENDS EXCLUDED)\*\*\*

FORWARDING ADDRESS: \_\_\_\_\_  
STREET NUMBER                      STREET NAME  
\_\_\_\_\_  
City                      STATE                      ZIP CODE: \_\_\_\_\_

HOME PHONE: ( ) \_\_\_\_\_ WORK PHONE: ( ) \_\_\_\_\_

SIGNATURE: \_\_\_\_\_

\*\* CLOSING THIS ACCOUNT WILL GENERATE A CLOSING BILL FOR WHICH YOU WILL BE RESPONSIBLE. ALSO CLOSING THIS ACCOUNT WILL SHUT OFF WATER SERVICE TO THE PROPERTY.

**WATER SERVICE WILL NOT BE DISCONTINUED AND YOUR RESPONSIBILITY FOR PAYMENT OF ALL CHARGES WILL NOT END UNTIL THIS NOTIFICATION IS RECEIVED BY THE WATER RESOURCES DIVISION**

IF YOU HAVE A DISABILITY THAT REQUIRES SPECIAL ASSISTANCE TO INTERPRET THIS APPLICATION, PLEASE CONTACT THE WATER RESOURCES DIVISION AT 310 458-8224. TDD: 310 458-8696

(FOR OFFICE USE ONLY)

CUSTOMER FAX#: \_\_\_\_\_ SERVICE ORDER NO: \_\_\_\_\_