



Service Termination Request

Complete this form to authorize Spanish Fort Water to terminate your water service at the address you give us. We will read out your account as of the terminate date you give us, and either send you a final bill or a refund from your initial deposit.

Name on the account _____

Service address _____

Requested date for termination _____

Phone number _____

Forwarding address _____

City _____ State _____ Zip Code _____

Signature _____ Date _____