

**ALMA CENTER MUNICIPAL UTILITIES**  
**TERMINATION FORMS**

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

SERVICE ADDRESS: \_\_\_\_\_

DATE SERVICE TO END \_\_\_\_\_

FINAL BILLING ADDRESS: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

PHONE NUMBER: \_\_\_\_\_

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

NAME OF PROPERTY OWNER: \_\_\_\_\_

TRANSFER TO: LANDLORD \_\_\_\_\_ NEW TENANT \_\_\_\_\_ NEW OWNER \_\_\_\_\_

\_\_\_\_\_

**FOR OFFICE USE ONLY**

SERIAL NUMBER \_\_\_\_\_

ENDING READING \_\_\_\_\_