

CLAY ROANE PUBLIC SERVICE DISTRICT  
VOLUNTARY TERMINATION RECORD

I, \_\_\_\_\_, CUSTOMER OF RECORD  
FOR ACCOUNT NO. \_\_\_\_\_, HEREBY REQUEST THAT MY  
WATER SERVICE BE TERMINATED ON \_\_\_\_\_ AT  
THE SERVICE LOCATION, \_\_\_\_\_.

\_\_\_\_\_  
CUSTOMER

\_\_\_\_\_  
DISTRICT REPRESENTATIVE

PURSUANT TO RULE 4.1.e. CLAY ROANE PSD HAS 24 HOURS TO TERMINATE SERVICE AFTER THIS FORM HAS BEEN SIGNED BY CUSTOMER OF RECORD. IF NO SUCH FORM IS ON FILE, CUSTOMER OF RECORD WILL CONTINUE TO BE LIABLE FOR ALL WATER USAGE AT SAID SERVICE LOCATION.