

CITY OF GERALD



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WATER/SEWER/TRASH SERVICE DISCONNECTION

*Please note requests to disconnect service received after 2:30 pm will result in disconnection on the following workday.

Today's Date: _____ Request Date To Turn Off Services: _____

Applicant Name: _____ Co-Applicant Name: _____

Service Location to be Disconnected: _____ Unit/Apt#: _____

Forwarding / New Mailing Address: _____

Last 4 #'s of S.S.N: _____ D.O.B.: _____ Phone#: _____

E-Mail: _____

Please Circle One: Renting / Leasing / Home Owner (if modular/trailer deposit required)

Landlord Name: _____ Phone#: _____

Section 700.055 - Rental/Leased Property Service Connection Deposit.

A one hundred dollar (\$100.00) deposit for utility service will be required of any person(s), business or corporation renting or leasing any premises and of any owner, renter or leaser of a mobile or manufactured home. It shall be the responsibility of the owner or agent of the owner of the premises to notify the City in writing of any change in tenants for said premises, prior to any deposit being accepted from a new tenant or any refund being given to a previous tenant. The deposit will be made with the Utility Clerk prior to service being connected. The deposit will remain with the City until such time as a written request by the depositor is made and received by the City notifying the City to disconnect service. When the request for disconnect of services is received by the City, the Utility Clerk shall notify the City Clerk of disconnection and request refund of deposit. Any usage of the utilities made prior to the deposit will result in immediate disconnect until such time as the deposit and penalty for unauthorized usage is made with the Utility Clerk.

I understand that my security deposit will be applied to the final bill. I agree to pay any interim bills prior to the final bill. If the final bill is less than the security deposit, a refund check will be mailed to the forwarding address provided on this form. I understand that the refund will be mailed within six to eight weeks of having service disconnected.

If the security deposit is less than the final bill, I agree to pay the balance due in full by the due date indicated on the final bill. I understand that failure to pay the balance due by the requested date will result in the account being turned over to a collection agency

APPLICANT'S SIGNATURE

ADDITIONAL APPLICANT'S SIGNATURE (if applicable)

*****OFFICE USE ONLY*****

Received by: _____ Date Disconnected in System: _____

Security Deposit to be applied / refunded: \$ _____

Meter Reading: _____ Meter# _____ Bk: _____ Seq: _____ Acct#: _____