

IMPORTANT NOTICE: This request must be completed in full and signed by the party or parties (property owner) requesting termination of water service. In signing this request, the property owner understands and agrees to the following. "Reinstatement of water service must be done in accordance with the currently published rules and ordinances, rates and fees in force at the time reinstatement of water service is requested"

Request for Termination of Water Service

Requestor (Home Owner's Name):			Emerald Bay Club Number			
Service Address (Street)		City	State	Zip	Phone Number	
Reas	on for Termination:					
	Water Service terminated at customer request. Reques			ed Termination Date:		
	*Water Service terminated due to non-payment.			Termination Date:		
	*Water service terminated due to rule/ordinance, or safety violation.			Termination Date:		
Note	s to Applicants:					

In general it is not advisable to terminate water service unless the service has <u>no</u> requirements for even small amounts of water such as ice makers. Most home owners leave the water connected while a home is on the market even if it is un-occupied. Sprinkler systems and homes that are for sale and open to the public for viewing require some water. A vacant lot that has existing water service may possibly be an example of when it would be advisable to request termination of service until such time as water service is required.

All required fees are due at the time of application including monthly water and wastewater service cost.

Current District Rules, Regulations, District Ordinances, Water and Wastewater Rates, and Fees are available for review at the Emerald Bay Municipal Utility District's web page <u>www.emeraldbay-tx.gov</u>.

Signature of Requestor (Property owner): _____ Date: _____

*Property owner's signature <u>NOT</u> required for termination due to a rule/ordinance violation, safety violation, or for non-payment.

For District Use Only

Final Meter Reading: _____ Date: _____ Meter Reader's Initials: _____

Approved By District Treasurer: _____ Date: _____

Distribution: To File Water System Operator MUD Directors