

Village of Elkhart
Water Department

Request for Change or Termination of Water Service (Existing Account)

Name:	
Account Number:	

Check if this is a change to your account.

Existing Service Address:	
New Service Address:	
Existing Mailing Address:	
New Mailing Address:	
Effective Date:	

Check for temporary interruption of water service.

Beginning Date:	
Ending Date:	

Check for permanent termination of water service.

Effective Date:	
Mailing address for Security Deposit:	

Signature _____

Date: __/__/__

FOR OFFICE USE ONLY

Final meter reading:	
Date of security deposit refund:	
Check no:	