



## Porter Special Utility District

22162 Water Well Road

Porter, Texas 77365

Office: (281) 354-5922

Fax: (281) 354-5050

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### DISCONTINUANCE OF WATER SERVICE

Customer Name: \_\_\_\_\_ Account #: \_\_\_\_\_

Address: \_\_\_\_\_ WO #: \_\_\_\_\_

I hereby request that the water meter for above-referenced account be turned off and locked. The District does not disconnect water services on Fridays, Saturdays, Sundays, or Holidays.

I request that the final reading be taken on \_\_\_\_\_ and to have the final bill deducted from my deposit and the remaining balance, if any, be sent to me at the address below. I also understand, and agree, that I am financially responsible for taking care of any outstanding balance on my account.

I understand that if I should want my water service reinstated, I will have to apply for water service as a new customer. I also understand that I will have to pay all cost(s) as indicated in the current 1) Porter Special Utility District Rules and Regulations, and 2) Porter Special Utility District Schedule of Rates, Fees, and Charges. Future ability to deliver water service will depend upon system capacity, which I understand may be limited and may require capital improvements necessary to deliver adequate water service. I further understand that these capital improvements will be at my cost.

A copy of your Driver License or Identification is required.

\_\_\_\_\_  
**Customer Signature**

\_\_\_\_\_  
**Date**

\_\_\_\_\_  
**Porter SUD Representative Signature**

\_\_\_\_\_  
**Date**

Mail REFUND check to: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Phone Number: \_\_\_\_\_ Email: \_\_\_\_\_

**Deposit refunds will be mailed out 45 days from the date of requested disconnect date.**