



**CITY OF LARAMIE**

Administrative Services Department  
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Laramie, Wyoming 82073

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**Disconnect/Water Shutoff Form**

Date: \_\_\_\_\_

Account Number: \_\_\_\_\_ - \_\_\_\_\_

Address of Service: \_\_\_\_\_

Contact Phone Number: \_\_\_\_\_

Customer Name: \_\_\_\_\_

Forwarding Address:

\_\_\_\_\_  
\_\_\_\_\_

Final Date of Responsibility: \_\_\_\_\_

**Is the water to be completely shut-off?**

Yes                      No

Does this account have a garbage stop in effect?

Yes                      No

Is this account currently billed as low income?

Yes                      No

Does this account bank draft automatically?

Yes                      No

**\*If ACH customer, draft final bill?**

Yes                      No

Are you the owner of the property?

Yes                      No

**Is this a route 7 address?**

Yes                      No

**If owner:**

New owner or realtor: \_\_\_\_\_

Contact Number: \_\_\_\_\_

Notes: \_\_\_\_\_

\_\_\_\_\_

**Internal Use Only**

Form Written/Owner Verified by: \_\_\_\_\_

Date: \_\_\_\_\_

H.T.E. Changes made by: \_\_\_\_\_

Date: \_\_\_\_\_

TF/FR Service Order Generated: \_\_\_\_\_

Date: \_\_\_\_\_