



Utility Operations Division
 Customer Service
 316 Breard Street
 Monroe, LA 71201
 Ph (318) 329-2220 Fax (318) 329-3358
 e-mail: customer.service@ci.monroe.la.us
 website: www.monroela.us

REQUEST TO DISCONTINUE SERVICES

****PLEASE PRINT****

This request must be completed and received by Customer Service at least one (1) business day prior to the requested discontinuation date. Any requests received the day of requested discontinuation date will be processed for the next business day. If the requested date falls on a weekend or city holiday, the request will be completed on the following business day.

I am discontinuing utility services with the City of Monroe.

Name As It Appears on City of Monroe Utility Account _____ Account Number _____

Service Address to be Discontinued _____ Date to Discontinue Services _____

LAST 4 of SSN _____ Phone Number _____

NEW MAILING ADDRESS:

Street Address _____

City, State, Zip Code _____

I am the customer named above (if residential).

I am not the customer named above (if residential). My relationship to customer is _____

I am the owner and/or representative of the service location named above (if commercial).

Note: If you pay via draft and do not want your final bill drafted please initial here _____ .



Signature _____

Mail to P.O. Box 1743, Monroe, LA 71210, Email to customer.service@ci.monroe.la.us or fax to (318)329-3358

To be completed by City of Monroe staffonly.

Entered By: _____ Date: _____ Account Noted: _____