



CITY OF HARRISONBURG
PUBLIC
UTILITIES

2155 BEERY ROAD, HARRISONBURG, VA 22801
OFFICE (540) 434-9959 • FAX (540) 434-9769

UTILITY DISCONNECTION FORM

Name: _____

Account Number: _____

Last 4 digits of Social Security #: _____

Service address to be disconnected:

Date of disconnect: _____

(You must choose a business day in the future; we do not disconnect service the same day form is submitted, no weekends or holidays)

Mailing address for final bill:

Address Line 1

Address Line 2

City, State, and Zip Code

Daytime Contact Phone Number

Preferred: Call Text Email

Email Address

Comments/Questions

****FOR INTERNAL OFFICE USE
ONLY****

Received / Input by: _____

Date: _____

Verified by: _____

Date: _____