

HUNGRY HORSE COUNTY WATER AND SEWER DISTRICT
PO BOX 190309
HUNGRY HORSE, MT 59919
406-387-5694

ORDER FOR ABANDONMENT OF WATER SERVICE

REQUESTED SHUT OFF DATE: _____

ACCOUNT #: _____

CUSTOMER NAME: _____

MAILING ADDRESS: _____

SERVICE ADDRESS: _____

I certify that I own the property at the above listed service address. I also certify that that removing this service will not endanger human health or life or cause property damage to the listed service address. I agree to hold harmless Hungry Horse County Water and Sewer District and its contractors for any harm or unanticipated consequences arising from this request.

In addition, I am aware that if water service is to be re-established at this address, Plant Investment Fees and any costs associated with bringing the service into compliance with District standards at the time of reconnection will be required to be paid prior to reconnection.

Signature _____ Date _____

Printed Name _____

FOR OFFICE USE ONLY

Date of Disconnect _____