OVERSTRAND MUNICIPALITY



APPLICATION FOR DISCONTINUATION OF SERVICES AND FINAL READINGS

(AT LEAST 48 HOURS NOTICE MUST BE GIVEN IN ADVANCE PREFERABLY 7 DAYS)

(AT LEAST 46 HOORS NOTICE MOST BE GIVEN IN ADVANCE, THEI ENABELY DATS)								
Erf No		Suburb		Account Number				

Name/Business											
ID No											
Street Address (where service is to be discontinued)											
						En	nail Address				
Reason for disconti											
Contact No		Home			Work		Mobile				
Mark the appropriate square with an X											
WATER	Domest	ic		Business			Industrial		Build	ding	
ELECTRICITY	Domest	ic		Business			Industrial		Build	Jing	

- i. Kindly disconnect the marked services on ______ and refund to me the deposit, less any amount I may owe the Municipality.
- ii. Kindly forward the final account to my/our new address:

Now oddross		
New address:	Postal code	
	Municipal Acco	ount No:

iii. Please transfer my credit into my/our bank or municipal account:

Requirements:

- i. Attach proof of verified banking details (i.e. E-stamped statement, bank verification letter, cancelled cheque.
- ii. Form should be signed by all owners of the property.
- iii. If registered in a business or trust, proof of directorship or authorisation letter from registered trustees must be attached. If the name of banking details differs, a resolution letter from the owner/s, business, trustees must be attached.
- iv. I/We undertake to settle any outstanding balance within 30 days of discontinuation of services to avoid any legal action.

Applicant signature

Date

OFFICE USE ONLY									
Record updated by			Date	ate Slip No					
Change of address	Yes	No							
Disconnection fee	Amount		Receipt		Date				
Final reading Water			Meter No						
Final reading Electricity			Meter No						
New Account No									