

Water/Finance Department

200 H Street, Antioch California 94509

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## DISCONNECTION FORM

**\*\*FIELDS IN RED MUST BE COMPLETED\*\***

\*Account No: \_\_\_\_\_ \*Stop Service Date: \_\_\_\_\_

\*Service Address: \_\_\_\_\_

\*Name(s): \_\_\_\_\_

\*Driver's License No: \_\_\_\_\_ \*Last four digits of Social Security or Tax ID No: \_\_\_\_\_

\*Reason For Terminating Service:  Owner Sold Property  Owner-Renting to Tenant

Tenant Moving Out  Other

\*Mailing Address (forwarding address): \_\_\_\_\_

If Other, Please Explain: \_\_\_\_\_

Primary Phone: \_\_\_\_\_

Email Address: \_\_\_\_\_

**\*\* Note: All service requests are scheduled for the next business day, unless a later date is provided. Water service disconnection will occur between 8-a.m to 5-p.m. To obtain same day service, a same day service fee of \$154.00 will be required. \*\***

### APPLICANT ACKNOWLEDGEMENT:

I hereby acknowledge the following:

- ❖ By signing my name below, I verify that I am authorized to make updates to this City of Antioch Water Account.
- ❖ The Disconnection Bill will be mailed to the forwarding address provided above.

\*Applicant Signature: \_\_\_\_\_ \*Date: \_\_\_\_\_