



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](mailto:customer.service@ci.monroe.la.us)  
 website: [www.monroela.us](http://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.

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Name As It Appears on City of Monroe Utility Account \_\_\_\_\_ Account Number \_\_\_\_\_

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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](mailto:customer.service@ci.monroe.la.us) or fax to (318)329-3358**

*To be completed by City of Monroe staff only.*

Entered By: \_\_\_\_\_ Date: \_\_\_\_\_ Account Noted: \_\_\_\_\_