



THE CITY OF MADRAS

WATER/SEWER SERVICE CANCELLATION

125 SW E Street, Madras, OR 97741
 P: (541) 475-2344 F: (541) 475-7061

REQUEST INFORMATION	
Date:	Date of Requested Service:
Name:	Phone Number:
Email Address:	
Service Address:	
Forwarding Address:	
City:	State: Zip:
Owner's Name:	Owners Phone number:
<input type="checkbox"/> Please refund any deposit balance to the forwarding address listed above.	
Customer Signature: _____	

City of Madras is an Equal Opportunity Employer

FOR OFFICE USE ONLY	
Account Number:	Water/Sewer: _____ Sewer: _____
Turn Meter: ON: ___ OFF: ___ Meter ID # _____ READING: _____	
Deposit: Amount: _____ Credited _____ Refunded _____ Final Billed _____	
Verified Identification: Yes: _____ No: _____	Request Taken From:
Deposit Transferred To:	Comments:
Completed by: _____ Date/Time: _____ (Wastewater)	