



# CITY OF ELOY

FINANCE DEPARTMENT  
595 North C St. STE 103  
Eloy, AZ 85131

## REQUESTING SHUT OFF SERVICE

TODAY'S DATE \_\_\_\_\_ ACCT# \_\_\_\_\_

I \_\_\_\_\_ REQUEST TO SHUT OFF SERVICE AT

\_\_\_\_\_

ON THIS DAY \_\_\_\_\_ AND SEND MY FINAL BILL TO

\_\_\_\_\_

\_\_\_\_\_

SIGNATURE \_\_\_\_\_

AGENT INT \_\_\_\_\_