

# *Waterworks District No.2, Parish of Beauregard*

## **UTILITY BILLING SERVICES**

**Forward your completed Disconnect Service/Final Bill Request Form to the address in the above letter head or you may fax or email a copy, a current PHOTO ID is required.**

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### **DISCONNECT SERVICE/FINAL BILL REQUEST**

A minimum of 24 hour notice is required prior to Disconnect Date.

(Please Print)

Today's Date: \_\_\_\_\_

Account Number: \_\_\_\_\_

Customer's Name: \_\_\_\_\_

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

Mailing Address:  
(for final bill) \_\_\_\_\_

Phone Number: \_\_\_\_\_

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Disconnect Date: \_\_\_\_\_

(Must be a business day (Monday – Friday))

Requested by: \_\_\_\_\_

Photo ID presented: Yes \_\_\_\_\_ No \_\_\_\_\_  
(copy attached)