



ACCOUNT CLOSURE REQUEST

Account # _____ - _____ - _____

Please fill out the form completely and legibly to close your utility account.

Please select a reason: ☐ Moved ☐ Sold Home ☐ Owner Sign off for Tenant ☐ Other

Is this account signed up for Rapid Pay/Auto Pay ☐ Yes or ☐ No?

Name on account _____ Close account on*: _____

**Must be current or future date.*

Service address _____ Phone # _____

Please list your forwarding address. _____

Email address _____

***Please note daily charges will continue on your account until we receive your signed request to close the Utility account listed above at which time, we will read the meter and turn off services.**

Signature _____

Today's date _____

You may return the completed & signed form in person at 203 S. Pacific Ave-Kelso M-T 8:00-6:00. If you unable to deliver your request in person you may email this form along with your picture ID to utilities@kelso.gov or fax to 360-425-9807 Incomplete requests will not be processed.