

Signature

Gastonia-Scurry Special Utility District

Request for Service Discontinuance

l,	, hereby request that my water account
number	located at,
be disconnected fro	om Gastonia-Scurry Special Utility District service. I understand that if I
should ever want n	ny service reinstated, I may have to reapply for service as a new member and
I may have to pay a	all costs as indicated in the current copy of the Gastonia-Scurry Special Utility
District Rate Order	& Service Policy. Future ability to provide service will be dependent upon
system capacity, w	hich I understand may be limited and may require capital improvements to
deliver adequate se	ervice. I also understand that these improvements will be at my cost. I
further represent t	o the District that my spouse joins me in this request and I am authorized to
execute this Reque	est for Service Discontinuance on behalf of my spouse.
Requested Final Re	ad Date:
Forwarding Addres	ss:

Note: Charges for service will terminate when the Gastonia-Scurry Special Utility District office receives this signed statement and final payment.

Date