



City of Westmorland
Application for Service Disconnect & Refund
 Utility Department
 355 South Center Street Westmorland CA. 92281
 Phone (760)344-3411 / Fax (760) 344-5307
 Email: info@cityofwestmorland.net

Name on Account: _____

Date: _____ Service Disconnect Date: _____

Deposit: \$ _____ Date of Deposit: _____

- CASH
- CHECK

Type of Applicant:

- Owner
- Tenant
- Realtor
- Commercial
- Other: _____

Name: _____

Social Security Number: _____ - _____ - _____

ID Number: _____

Type:

- Driver License
- Identification Card

Location of Service: _____ Phone Number: _____

Forward Address (include P.O. Box if applicable):

I hereby to pay for all charges for city services to the above premises, as established by ordinance and resolution adopted from time to time by the City of Westmorland

Date: _____ Applicant Signature: _____

Office Use:

Location I.D: _____

Account Location: _____

Last Month Billed: _____

Customer Deposit: [] Yes
 [] No

Office Staff Signature: _____

Date: _____

Public Works:

Work Order No. _____

Meter Rate: _____

Date Read: _____

Employee Name: _____