

Timberon Water & Sanitation District  
1 Bobwhite Cir., Ste. 1  
Timberon, NM 88350

Phone: 575-987-2250

eMail: [billing@timberonwater.com](mailto:billing@timberonwater.com)

## REQUEST FOR DISCONNECT

ACCOUNT # \_\_\_\_\_

Occupant \_\_\_\_\_

The undersigned owner or occupant of the premises at \_\_\_\_\_

Requests a DISCONNECT of water service on (date) \_\_\_\_\_

And agrees to pay the following fees:

\_\_\_\_\_ \$75.00 Standard Disconnect

Or

\_\_\_\_\_ \$100.00 Short-Notice Disconnect (less than 72 hours notice)

Any Security Deposit held for this account will be applied to the final bill.

A copy of the water service rate and rules and regulations of the District as filed with the Public Utility Commission are kept on file by the District and open to public inspection.

IF THIS IS A RENTAL PROPERTY, the legal owner is responsible for any unpaid balance left owing by the renter.

Name/Signature of legal owner \_\_\_\_\_

The Undersigned hereby grants unrestricted access to the meter box for service and monthly meter readings.

I agree to pay at such rates as are, or may be, established and to receive and use the water subject to the conditions, rules and regulations of the District as adopted and such others as it may from time to time adopt.

Signature of occupant \_\_\_\_\_

Date signed \_\_\_\_\_

Billing address (if bill is to be forwarded) \_\_\_\_\_

\_\_\_\_\_