City of Tracy
Finance and Administrative Services Department • 333 Civic Center Plaza • Tracy • CA • 95376-4062
eMail: customerservice@ci.tracy.ca.us • Phone: 209-831-6800 • Fax: 209-831-6846
Website: http://www.ci.tracy.ca.us/

# REQUEST TO CLOSE CITY OF TRACY UTILITY ACCOUNT

_____
Account Number

_____
Name on Bill

_____
Service Address

_____ _____ _____
Requested Close Date* Requested by (full name) Phone Number

*This request will be processed and water meter read within 1 business day of your requested close date. Requests received by our office later than your requested close date will be processed with an effective date that is within 1 business day of receipt.

Forwarding Address (for Final Bill) _____

_____

_____

Signature_____ Date_____

ADDITIONAL REQUIRED INFORMATION:

## For Tenants:

_____
End Date of Rental Agreement

_____
Landlord's Name

## Important Notice:

The City of Tracy requires copies of Close of Escrow documents or new Rental Agreements before processing any requests for change of service.
"Notice of Trustee Sale" or other official sale/transfer documentation is required on all Foreclosed properties.

## For Property Owners/Landlords:

_____Property Sold:

_____
Escrow Close Date
----------OR----------

_____Property Rented:

_____
Start Date of Rental Agreement

_____

_____
Tenant Name(s)

Property Owners are responsible for basic monthly service fees on any vacant properties. An account for vacant property will not be closed.

For Office Use Only:

Date Received_____ Date on Daily List (actual close date) _____ Route_____

ID_____ Read_____

Request made : In Person_____ By Phone_____ By Mail_____ Fax_____ eMail_____ Other_____

Name _____
LAST
FIRST
Service Location _____