



V.I. WATER AND POWER AUTHORITY

Application to Terminate Form

Electricity or Water

Please select one and print legibly:

Electricity Water Sec. Lights

WF: _____

WF: _____

1. I would like to apply for termination of electricity or water supply for the premises below:

Name: _____

Account No.: _____

Premises Address: _____

This Premise is currently occupied by myself

2. Preferred date of disconnection: _____

Month Day Year

3. I acknowledge that the security deposit will be used to offset my final charges (if any) before any credit balance could be refunded through:

Check, or

Transferred to my active/new WAPA account (Account No. : _____ - _____)
(WAPA reserve the right to transfer any debit balance to the above account or any other active account registered under your name)

4. Please provide your latest correspondence address for final bill or refund check purposes:

New Correspondence Address: _____

Email: _____

Contact No. (Home): _____ **(Mobile):** _____

Declaration:

I hereby declare that all the information given is true and if any discrepancies are found, WAPA shall have the right to take any appropriate action accordingly.

Customer Signature

Date

Taken by: _____
WAPA Representative

Date