

SYRACUSE CITY

VACATION AGREEMENT

Name _____ Acct # _____

Service Address _____

Forwarding Address _____

Phone # _____

Reason for Leaving _____

Date Leaving _____ Date Returning _____

I desire to have the following services discontinued:

Water / Sewer

Garbage

Do you want the water to the house shut off? _____

Do you want the garbage cans picked up? _____ (If not, all garbage cans need to be locked up in a garage)

I understand that to have services discontinued, I must be gone for a minimum of three (3) months. I also understand that I will continue to be billed for the year-round charges for Secondary Water and Storm Sewer.

Dated this _____ day of _____, 20_____.

Signature