



Port of the Islands Water & Sewer

Termination for the Utility Service

Name(s) on Account: _____

Daytime Phone: _____ Cell Phone _____

Email Address: _____

Date Service to End: _____ (Deposit amount will be refunded against the final billing and mailed to the final billing address)

Please select services currently being billed: ___ Water ___ Sewer ___ Irrigation

Service Address- Street _____

City _____ State _____ Zip _____

Final Billing Address- Street _____

City _____ State _____ Zip _____

SUBMIT by fax to: 239-214-6074 or

Email: Dmartin@cddmanagement.com

Premier District Management, 3820 Colonial Blvd, Suite 101, Fort Myers, FL 33966

Important Information- Please read

If request is made after 1:00 PM the service will be disconnected the following business day.

There will be a \$10.00 disconnection fee charged with the final billing.

- I am disconnecting the utility service from Port of the Islands Water and Sewer Utility at the above address. I agree to follow and abide by all rules for utility service and to pay charges in effect as stated on each bi-monthly bill.
- I am also responsible for making sure that all faucets are turned off in the home before the service is turned off. The District is not liable for damages caused by water faucets or outlets left on.

• Signature: _____ Date: _____

(Write or type name to acknowledge above statement)