



Phone: (304) 278-8029

Voicemail message system monitored on off-days

Website: PawPawWater.com

Email: PawPawH20@gmail.com

Fax#: (304)278-8119

Request STOP SERVICE (Permanent or Temporary) (Rev 10Aug21)

*Customer(s) will continue to be billed until this completed request form is received by the office
(unless meter is already on schedule for disconnection because of nonpayment).*

- Until the meter in the pit has been officially locked out by the PPPSD staff, billing will continue to be generated and remains the responsibility of the customer(s) of record, regardless if there is any use.
 - Requested service modifications are performed on nearest business day to requested date listed (Monday - Friday between hours of 9am - 5pm).
- Customers will be held liable for any repair costs for any damages caused by unauthorized manipulation of meter/pit equipment.

**Complete the following information using blue or black ink.
Return by mail or leave at DropBox located Arnettsville Community Center.**

Account # _____ serving _____ (physical address of property)

Customer(s) of Record : _____ (print name as listed on account)

Co-Applicant: _____ (print name as listed on account)

The meter can be shut off and the final meter reading taken on _____ (Insert date)

FINAL Bill/Refund to be Mailed to: _____ (Street Address/Apt#)

_____ (City, State, Zipcode)

I/we can be reached at the following phone number: _____

Email address: _____

PERMANENT Stop Service due to: _____
(Moved, sold property, rented property, etc.)

My signature below acknowledges that I hereby authorize (where applicable) any security deposit remaining on file for this account, be applied to any balance left unpaid on this account, I also understand that any remaining balance on this account that is not paid within 20 days of the final reading date is subject to legal collection processing.

*If property is being sold or a new occupant taking over the account at this service address, a new service application and current PPPSD policies, can be found on website or can be obtained by contacting the office. *If new resident has not made application for service and paid the security deposit prior to the above date, the meter will be physically removed or locked according to date listed above.*

TEMPORARY Stop Service due to: seasonal use and/or traveling.
(Customers should contact the office a minimum of one week prior to date they want service restored, if possible)

My signature below acknowledges that I hereby authorize that the PSD maintain any security deposits (where applicable) and treat this account as inactive until such time as I notify the office of a service restoration date. I further, hereby request and authorize the current reconnection fee to be billed to my account, on date of service restoration, with the understanding that billing begins the date the meter is back in service, regardless of usage and the original service agreement / contract on file remains in effect.

By signing below, I/we, hereby request to stop the service as noted above for the service address listed.

(Signature of Customer of Record)

(Signature of Co-Applicant)

Date: ____/____/____

Date: ____/____/____

OFFICE USE: Route # _____ Sequence# _____

Permanent Disconnection: Prepare Office FINALIZE ACCOUNT Worksheet _____ Date Account Finalized: ____/____/____

Temporary Disconnection: ____ Change Rate Code to 5 (inactive); phone# _____ removed from calling list(s)
Route # _____ Sequence# _____

When customer returns: ____ change rate code to 1 (basic rate) ____ add reconnection fee
____ issue workorder for reset meter ____ add customer information back to calling list(s)
(Acct#, Customer Name, Route #, Seq#, Phone #)