

City of Du Quoin 302 E. Poplar Street Du Quoin, IL 62832 (618) 542-3841 www.duquoin.org

Water / Sewer Disconnection Request

(Must be submitted in-Person at City Clerk's Office)

Today's Date	Requested Disconnect Date
Last Name	First Name
Driver's License or State I.d. #	
Home Phone #	<u> </u>
Service Address for Disconnection	n the next business day.
Forwarding Address (For Deposit Refund, if applica	able)
	_
Name of New Property Owner (if known):	
Signature	
(By signing, you agree to pay final balance in full o	r have amount due deducted from initial deposit if applicable
For Office Use Only:	
Service Deposit Amount Refunded: \$	Date: