



Disconnection Request

Please return to the Business Office, by email to utilityclerk@starcitywv.com
or by fax to 304.599.1130

Account #: _____

Date to END Service: _____

Name: _____

FORWARDING Address:

Phone Number: _____

Signature: _____

Date: _____

****IF APPLICABLE, UTILITY DEPOSIT REFUND CHECKS WILL BE ISSUED WITHIN SIX (6) WEEKS OF DISCONNECTION DATE. CHECKS WILL BE SENT TO THE FORWARDING ADDRESS LISTED ON THIS FORM. IF IT HAS BEEN LONGER THAN SIX (6) WEEKS AND YOU HAVE NOT RECEIVED YOUR REFUND CHECK, PLEASE CALL THE BUSINESS OFFICE. AS A ONE TIME COURTESY, WE WILL REISSUE THE CHECK AT NO CHARGE. WE STRONGLY SUGGEST THAT YOU PICK UP YOUR CHECK IN PERSON AS WE WILL NOT COVER ANY ADDITIONAL FEES FOR REISSUED CHECKS NOT RECEIVED****

For Office Use Only:

FINAL METER READING: _____ Completed by: _____ Date: _____