

**City of Richmond Hill**  
P O Box 250  
Richmond Hill, GA 31324  
Phone 912-756-3345 / Fax 912-756-3368

**Disconnection Request Form**

Disconnect Date: \_\_\_\_\_

Account Number: \_\_\_\_\_

Customer Name: \_\_\_\_\_

Contact Phone Number: \_\_\_\_\_

Disconnect Address: \_\_\_\_\_

Forwarding Address: \_\_\_\_\_

Customer Signature: \_\_\_\_\_

Date: \_\_\_\_\_

Office Use Only  
Date of Request: \_\_\_\_\_  
Request Made    Walk-In: \_\_\_\_\_    Other: \_\_\_\_\_  
Verified ID \_\_\_\_\_  
Ending Meter Reading: \_\_\_\_\_