PLEASE PRINT OR TYPE



Diablo Water District Request to Close Water Account

If you are moving to a different Oakley residence, please also complete the **Application for Water Service**

FIELDS IN RED MUST BE COMPLETE

| ACCOUNT NUME | BER: |
|--|---|
| REQUESTED DISCONNECT DATE: (Monday – Friday, non-holidays only) | |
| NAME(S) ON ACCOUNT: | |
| SERVICE ADDRESS: | |
| REQUESTED BY: | PHONE NUMBER: |
| DATE OF BIRTH: | DRIVER'S LICENSE #: |
| FORWARDING ADDRESS FOR FINAL BILLING: | |
| Transfer deposit to: | |
| right to request copies of escrow closing documents, or rental agreements, b | be transferred to the new service address. Diablo Water District reserves the refere processing any requests for change of water service. |
| Release of Liability: I request that Diablo Water District turn off the water realize that if all water-using appliances are not completely closed, or if the responsibility for any such damage and agree to hold Diablo Water District | re are any leaks, the premises may suffer water damage. I hereby accept full |
| SIGNATURE: | DATE: |
| PROPERTY OWNERS/LANDLORDS: | |
| Property Sold: Escrow Close Date: | |
| OR | |
| Property Rented: Start Date of Rental Agree | ment: |
| Tenant's Name(s): | |

** Diablo Water District reserves the right to request copies of escrow closing documents or rental agreements before processing any requests for change of water service. **

Please return to 87 Carol Lane, Oakley, CA 94561 or Fax: 925-625-0814 or Email: customers@diablowater.org