



**Please complete this form and return to:**

Manalapan Town Hall  
600 So. Ocean Blvd.  
Manalapan, FL 33462

Phone: 561-383-2543

Fax: 561-585-9498

Email: [awatson@manalapan.org](mailto:awatson@manalapan.org)

## **ACCOUNT TERMINATION FORM**

Note: If termination of service is being requested due to the sale of the property, please submit a copy of the signed Warranty Deed. **All requests take effect the date received unless effective date is in the future.**

**Please select one of the following:**

☐ Sold Property

☐ No Longer a Tenant

Account No.:	Customer No.:	Effective Date:
Name(s) on Account:		
Service Address:		
Home Phone:	Cell Phone:	Email:
Forwarding Address:		
City:	State:	Zip Code:
Additional Comments:		

Signature of Account Holder/Agent: \_\_\_\_\_ Date: \_\_\_\_\_

***This form must be notarized in order to process your request.***

STATE OF \_\_\_\_\_

COUNTY OF \_\_\_\_\_

Subscribed and sworn to (or affirmed) before me this \_\_\_\_\_ day of \_\_\_\_\_ 201\_\_\_\_, by \_\_\_\_\_

\_\_\_\_\_ [ ] who is personally known to me or [ ] produced \_\_\_\_\_ as identification.

\_\_\_\_\_  
Notary Public (Signature of Notary)

(Seal)

\_\_\_\_\_  
My Commission Expires:

Updated 2/15/2018