



CITY OF RENSSELAER

RENSSELAER, INDIANA

EXIT FORM

ACCOUNT INFORMATION			
Applicant Name:			
Property Owner Name:			
Forwarding Address:			
E-mail Address:			
Phone #:		Alternate #:	
Cancel Automatic Debit: (Please circle) Y / N		Transfer Deposits (s): (Please circle) Yes / No	
SERVICE INFORMATION			
Service Address:			
Effective Date to Discontinue Services:			
Work orders processed from 7:30am – 3pm. Requests after 3pm are processed following business day.			
ADDITIONAL INFORMATION			
PLEASE READ AND INITIAL EACH OF THE FOLLOWING STATEMENTS.			
<p>If transferring deposit(s) to another service address within the City of Rensselaer service territory, you may “share” the deposits/have (2) active accounts for 14 days.</p> <p>_____ If you need services at multiple locations longer than the allotted 2 weeks, you will be required to make a new deposit for each required utility service at the new service address.</p>			
<p>Meter deposits will automatically be applied to the final invoice unless transferred to another location. Any credit shall be refunded to the Customer. If there is a balance due, it is the _____ Customer’s responsibility to pay in full or make payment arrangements.</p>			
<p>_____ If the account becomes delinquent, deposits will be applied and the account may be subject to additional penalties and fees including court costs.</p>			
Customer Signature:			Date
For Office Use Only:			
Book:		Account:	
Priority Service: Y/N		Budget Billing: Y/N	Owner Letter Mailed:
Work Order #s	Water:	Gas:	Electric:
Meter Deposits	Date	Receipt #	Amount
Electric			
Gas			
Water			
Sewage			
Transfer Deposits to:			
Clerk initials & date completed			
Scanned:	Cubic:	Laserfiche:	GIS: