# Application for Disconnection

STAND NUMBER: _____

ACCOUNT CODE:

| | | | | | | | | | |
|---|---|---|---|---|---|---|---|---|---|
| | | | | | | | | | |

I, _____ hereby
(SURNAME AND INITIALS IN BLOCK LETTERS)

informs the Dihlabeng Local Municipality that I will be vacating the following address:

_____
(PHYSICAL ADDRESS IN BLOCK LETTERS)

SITE NUMBER: _____

DATE OF DISCONNECTION REQUIRED: _____

ARRANGEMENTS WILL BE MADE FOR ACCESS TO THE PROPERTY.

| NEW RESIDENTIAL ADDRESS | NEW POSTAL ADDRESS |
|---|---|
| | |

SIGNATURE: _____ DATE: _____

CONTACT NUMBER: _____

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FOR OFFICE USE ONLY

Date: _____

Processed by: _____