



## DISCONNECT FORM

City of Roanoke  
500 S. Oak Street  
Roanoke, TX 76262

Today's Date: \_\_\_\_\_

Disconnecting Address: \_\_\_\_\_

Name on Account: \_\_\_\_\_

Date of disconnect: \_\_\_\_\_

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

City, State, & Zip: \_\_\_\_\_

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

Account #: \_\_\_\_\_

Work Order #: \_\_\_\_\_ Completed By: \_\_\_\_\_