## **GOLDEN HILLS COMMUNITY SERVICES DISTRICT**

Mail: PO Box 637, Tehachapi, CA 93581-0637

Physical Address **no** mail: 21415 Reeves Street, Tehachapi, CA 93561

Email: staff@ghcsd.com

Phone: 661-822-3064 Fax: 661-822-8284

## REQUEST FOR DISCONNECTION OF WATER SERVICES

Complete form & return to GHCSD in person, fax, email, or by regular mail. (Regular mail may take several days to arrive)

## Please legibly print all information

Name	Account Number		
Property Address			
Were you the:	□ Owner	□ Tenan	t
Did this property sell?	□ Yes	□ No	□ N/A
If yes, escrow close date	· · · · · · · · · · · · · · · · · · ·		
If the premises are occupied, Gove water service without proper notificat delinquent, Government Code Sect users that they have the right to be current user, whether the premises pursued through legal avenues other	tion. If the premi ion 60371 requi come customer are legally or i	ses are occ ires the Dis s of the Dis illegally occ	cupied and the account i strict to notify the actua strict. This applies to th cupied. Eviction must b
The owner of record per Kern Cou payment of any water service cha accounts.			
Date of disconnection (regular bus	siness days onl	y)	
Send closing bill to:			
Name			
Address			
City		_ST	Zip
Email Address:			
Phone Number			
Signature		Da	te