

Mail, deliver this application to: CHARLOTTE WATER

Customer Services 5100 Brookshire Boulevard Charlotte, NC 28216

www.charlottewater.org (Service Connections)

Water and Sewer Dismantlement Application

Requested By						
First Name	Last name				Company, HOA, Developer, etc.	
Address					Apartmen	t/Unit #
City	State	Zip Email		Fax	Phone	
Service Address						
Scriffee Address						
Project Name					Phone (0	On-site Contact)
Site Address			Apartment/Unit #			
City	State	Zip		Email		
'Type SAME AS ABOVE? □Y □ N						
To Be Dismantled						
Complete the following:						
SERVICE ADDRESS	PREMISE NUMBER (ACCT. # FROM BILL)	DISMANTLE WATER/SEWER OR BOTH?	METER NUMBER (WATER ONLY)	SERVICE SIZE	DISMANTLE IMMEDIATELY? (YES OR NO)	SERVICE INACTIVE? (Has Move- Out been requested from 3-1-1)
Very Important: Dismantlement demolition please submit this for request a Move-Out of the existic service(s), this form must also be until the new service is installed, Out for the existing service listed applicant after the dismantleme required from both parties. Notes: Will you be requesting system deviced.	orm at least 90 daysing services. If you be submitted at the within <u>30-days of the days of the days</u>	s before demolition are applying for no time of new servic the new service inst est, in writing, a ca the original applica	n. If services are ew service and ve e application. I tallation, you mand apacity fee refut ant is different the	e still active you wish to receive of you require ex ust call 3-1-1 (70 nd. The refund v	must call 3-1-1 (70) capacity fee credit (isting service(s) to (4-336-7600) and rewill then be issued	14-336-7600) to for the existing remain active rquest a Move - I to the original
FOR CHARLOTTE WATER USE ONLY						
NCDOT Road: Y N, NCDOT Er Topo # Service Order #: Premise #: Cust #:						

