



City of Manassas Park
Water & Sewer Billing Office

One Park Center Court Manassas Park, VA 20111
Phone: (703) 335-8805 ~ Fax: (703) 393-9992
Email: water.billing@manassasparkva.gov

REQUEST FOR WATER AND SEWER TERMINATION
PLEASE PRINT LEGIBLY

Customer # _____

Service # _____

(Customer & service numbers are in the
top right corner of your bill under account
information)

Request is hereby made by the undersigned, to the City of Manassas Park, Virginia for termination of water, sewer, trash & recycling services at the service address listed below. Completed service termination request form must be received by the Water & Sewer Billing Office at least 24 hours prior to service termination.

Name/Account Holder: _____

Service Address: _____

New Mailing Address: _____

City: _____ State: _____ Zip Code: _____

Phone: (home) _____ (work) _____ (cell) _____

Email: _____ Social Security Number: _____

Please perform a final meter reading and termination of my service on: _____

Occupant of property/account holder is: Property owner Tenant Other

If renting, landlord information: Name: _____ Phone: _____

Notes: _____

I acknowledge, with my signature below, that I have reviewed the information contained herein. I agree to pay the final bill for water, sewer, trash and recycling furnished at the service address above, at the rate now or hereafter established, in accordance with the City ordinance governing water/sewer charges. I also understand that, per Section 25-31 (b) of the Code of the City of Manassas Park, any new account holder will be unable to open/establish a water/sewer account at this property until my account has been paid/settled in full. I understand that my final bill is due and payable immediately upon receipt.

(Customer name – please print)

(Customer signature)

Date: _____

Office Use Only
Date received _____ Processed by _____ Scheduled date _____ Work order# _____