

APPLICATION FOR AND CERTIFICATE OF DISCONTINUANCE SEWER MONTHLY USER CHARGE

I (we), the undersigned, do hereby respectfully make application for a six (6) month certificate of sewage discontinuance, in compliance with the City of Laingsburg Sewer Ordinance. I understand that it is my responsibility to re-new this application at the end of the six months if deemed necessary for my discontinuance to continue.

ADDDESS OF SEMED IIS	E DICCONTRILIA	NCE.		
ADDRESS OF SEWER US	<u>E DISCONTINUA</u>	NCE:		
REASON FOR DISCONTI	NUANCE:			
☐ This property is under Home, Remodel, etc). ☐ This is a rental property This home is temporarily Other (please offer a bri	stimated completion of that is not occupied at vacant (i.e. extended	this time.		lew
the City of Laingsburg services are resumed at t will be held liable for c without first giving pro	that the above in City Clerk in when the above describle harges in arrear oper notification ling will resum	oformation is conting ten worded property. It is if municipal to the City of	correct and I (we) will not which we will not with the work of the work of the work of this six month period	oal ve) ied k's
SIGNATURE OF APPLICA	NT		DATE	
APPLICANT(S) NAME (PH	UNT)		DATE	
ATTESTED BY:	DATE	TITLE	ACCOUNT UPDATED: [