



Board of Water Supply

www.boardofwatersupply.com

STOPPING OR DISCONNECTING SERVICE

----- PLEASE PRINT ALL INFORMATION -----

Date Stopping/Disconnecting Service:

NOTE: FORM MUST BE SUBMITTED THREE (3) WORKING DAYS PRIOR TO STOP DATE

Customer Name:

Service Address:

City: Zip Code:

Daytime Phone Number:

Requestor is the: Owner Renter Property Manager Rental Agent

MAILING ADDRESS FOR CLOSING BILL:

Mailing Address:

City: Zip Code:

Comments:

Please mail, e-mail, or fax a completed form to:

MAIL:

Board of Water Supply Call Center
630 South Beretania Street
Honolulu, HI 96843

E-MAIL:

CallCenter@hbws.org

FAX:

(808) 550-5566