



City of Ridgeland
100 W School St, 39157
P.O. Box 217, 39158
Phone (601) 856-3938
FAX (601) 790-2111

utilitybilling@ridgelandms.org
www.ridgelandms.org

REQUEST TO DISCONNECT SERVICE

DATE OF REQUEST: _____ ACCOUNT NUMBER: _____

ACCOUNT NAME: _____

SERVICE ADDRESS: _____

DATE TO DISCONNECT SERVICE: _____

(If requested date is today or a weekend/holiday, disconnect will be the next business day.)

NEW MAILING ADDRESS: _____

PHONE: _____ EMAIL: _____

THE RECYCLING CART ISSUED TO THIS SERVICE ADDRESS SHOULD REMAIN ON THE PROPERTY.

Where is the recycle cart located on the property (*garage, carport, behind the house, etc.*)?

Please be specific: _____

Please read carefully before signing:

I authorize the City of Ridgeland to disconnect services at the service address shown above. I understand the deposit will be applied to the final bill and I will receive a refund or statement for the outstanding balance. If I am on bank draft, my final balance will be debited from my bank account on the 16th of the month of the final bill. After 90 days of the final bill, any unpaid balance will be sent to collections.

SIGNATURE: _____ DATE: _____

**digital or typed signatures not accepted*