



**CITY OF ROSWELL**  
**WATER SERVICES TERMINATION**

415 N. Richardson • PO Box 1838 • Roswell, NM 88202-1838  
Phone: (575) 624-6711 • ROSWELL-NM.GOV

Date of Disconnect: \_\_\_\_\_

Name: \_\_\_\_\_ Service Address: \_\_\_\_\_

City/State: \_\_\_\_\_ Zip Code: \_\_\_\_\_

Address for final billing to be sent: \_\_\_\_\_

City/State: \_\_\_\_\_ Zip Code: \_\_\_\_\_

Reason for termination: \_\_\_\_\_

\_\_\_\_\_

Phone: \_\_\_\_\_ Email: \_\_\_\_\_

\_\_\_\_\_  
ESignature \_\_\_\_\_  
Date

or email form directly to **ROSWATERCS@ROSWELL-NM.GOV** or you can print the form and take it to the Water Billing Department, **415 N Richardson Ave.**

**FOR OFFICIAL USE ONLY**

Reviewed By: \_\_\_\_\_ Date: \_\_\_\_\_ Termination Service Date: \_\_\_\_\_

Deposit Paid \$: \_\_\_\_\_ Cust#: \_\_\_\_\_ LOC#: \_\_\_\_\_

Customer Name as listed on ID: \_\_\_\_\_ State & Driver's License ID: \_\_\_\_\_ SSN: \_\_\_\_\_