



# CITY OF LOMITA

Please return completed application to:  
 City of Lomita · Finance Department · 24300 Narbonne Avenue · Lomita, CA 90717  
 Phone: (310) 325 – 7110 Fax: (310) 325-4024  
 Office Hours: Monday – Thursday 7:30 a.m. to 5:30 p.m.  
 Alternate Fridays: 8:00 a.m. to 5:00 p.m.

**Clear Form**

## **APPLICATION TO STOP WATER SERVICE**

**Print Form**

Every effort will be made to terminate services on your requested stop date; however, some orders may be held until the following business day. All requests received will be processed the next business day, based on field staff availability. Service requests are not scheduled on weekends or holidays.		
Date of the Request:	Account Number:	
Date you want water service to stop in your name:		
Address of Property to Stop Service:		
Name on Account:	SSN/CDL/Fed Tax ID #:	
Contact Name, if different than applicant:	Work Phone:	
Home Phone Number:	Cell Phone:	
Forwarding Address (For Final Bill)	Street:	
	City:	
	State and Zip Code:	
Customer Signature:	Date:	
<b>ADDITIONAL REQUIRED INFORMATION</b>		
<b><u>FOR TENANTS:</u></b>	<b><u>FOR PROPERTY OWNERS/LANDLORDS:</u></b>	
End Date of Rental Agreement:	Property Sold:	
Landlord's Name:	Escrow Close Date:	
Landlord's Phone Number:	----- <b><u>OR</u></b> -----	
<b>IMPORTANT NOTICE:</b>	Property Rented:	
The City of Lomita reserves the right to request copies of Close of Escrow documents or Rental or Lease Agreements before processing any requests for change of service. Notice of Trustee sale or other official sale or transfer documentation is required on all Foreclosed properties.	Start Date of Rental Agreement:	
	Tenant Name(s):	
<b>Deposit Refunds and Final Billing:</b>		
Deposits that have not previously been refunded to the account will be applied during final billing. Any credit balance can be transferred to a new account in your name. Otherwise any credit balance will be refunded to you. Final bills will be generated and mailed approximately two to three weeks after your final reading is taken. Final bills that remain unpaid after 45 days will be sent to a collection agency.		
For Office Use Only:		
Date Received:	Cycle/Route: _____/_____	Date Water Service Turned Off:
Read Date:	Final Reading:	
Read By:	Order Completed by:	