

5919 MAIN STREET || NEW PORT RICHEY, FL 34652 || (727) 853-1016 || WWW.CITYOFNEWPORTRICHEY.ORG

Temporary Service Hold Request Form

Complete in its Entirety

ustomer Information:	
Property Owner's Name:	
Service Address:	
Phone Number: Email Address:	
Parcel ID# Account #	
Reason for Request:	-
ervice Hold Details:	
Water N/A	
Shut-Off Date: Restart Date, If Known:	
*Water and sewer base & billing charges still apply even if there is no consumption.	
Trash N/A	
Shut-Off Date: Restart Date, If Known:	
Home N/A	
Will home be remodeled? Yes No Will home be sold "As Is"? Yes No No	
Will home be demolished? Yes No If "Yes", when?	
Mobile Home N/A	
Does mobile home owner own the property? Yes No	
Will mobile home be remodeled?	
Will mobile home be removed from property? Yes No If "Yes", when?	
the undersigned, request a temporary hold on my service as specified above. I am responsible to notify the City ort Richey when to resume services.	of No
ustomer Signature: Date:	
otary Public:	
tate of	
ounty of	
ubscribed and sworn to before me this day of	
otary Public Signature:	
y Commission Expires:	