

Administration Department
(970) 984-2311
Fax: (970) 984-2716
www.newcastlecolorado.org



Town of New Castle
PO Box 90
450 W. Main Street
New Castle, Co 81647

VOLUNTARY DISCONNECTION/CERTIFICATION OF VACANCY

AFFIDAVIT

I, _____, do hereby certify the following:

I own the property located at _____.

The premises are vacant and unoccupied and I request that water and sewer services be temporarily disconnected.

The period of disconnection shall be from _____ to _____
And the premises shall remain vacant during this period.

I acknowledge that I am eligible for reduced water and sewer charges during this vacant period. These reduced rates will begin on the first of the month following this certification if this certification is not made prior to the period of vacancy. I also acknowledge that there is a \$ 15.00 fee for the disconnection and reconnection of utility service under this provision.

Signature

Date



For Town Use Only

Date disconnected _____ *Fee* _____ *Billing updated* _____

Date connected _____ *Fee* _____ *Billing updated* _____