

CUSTOMER SERVICE REQUEST FORM

Customer Information	
Surname/Company Name First	Name Middle Initial
Physical Address (House No. & Street Name)	Apartment/Suite Block & Parcel No.
Home Telephone No.	Work Telephone No.
Home Telephone No.	E-mail
Please select the service you require:	
Reconnection Off Reading Temporary Disconnection Add a Tenant/Authorised User Meter Relocation Billing Query Permanent Service Removal	
Reconnection/Off Reading/Temporary Disconnection/	Add a Tenant/Authorised User
Permanent Service Removal	Name (Surname, First Name, Middle Initial)
Requested Service Date: DD / MM / YYYY	
Notes:	Mailing Address
	Telephone No.
	Mobile No.
Meter Relocation	
I would like to arrange for a meter relocation. Please note there is a standard fee for meter relocation which covers the cost of labour and materials.	E-mail
Bill Query Details	Tenant/Authorised User Signature Date
Notes:	
	Account Holder Signature Date

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