



Request for Transfer/Cancellation of Service Form

Water & Trash Service

Today's Date: _____

I hereby request that the Water & Trash Service be transferred out of my name at the following service location:

(Physical Address)

The name on the account is _____
(First Name) (Last Name)

Account number: _____ Transfer service date: _____

Please forward my final bill to the following address:

Street: _____

City: _____ State: _____ Zip: _____

Home/Cell Phone: _____ Work Phone: _____

Email address: _____

Signature: _____



Please email to kclark@parkertexas.us, fax or mail to:
City of Parker, 5700 E. Parker Rd, Parker, TX 75002

OFFICE USE ONLY

Work Order # _____

Final Reading: _____

Acct Finalized By: _____

Date: _____