



## STOP SERVICE

Instructions: Required information is indicated by a red outline. After you have entered your information press the "Save completed form" button towards the bottom of the form and email the new file to solutions@jcw-custserv.org . Thank you.

**Customer Number**

Service Address

**Disconnect Date (mmddy)**

**Disconnect Date Unknown**

Account - First Name

Account - Middle Initial

Account - Last Name

**Relationship to Customer**

**Primary Phone Type**

**Primary Phone Field**

**Alternate Phone Type**

**Alternate Phone Field**

**E-mail Address**

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**Please update your mailing address**

**Mailing Address Information**

**Mailing Address  
Line 1**

**Mailing Address  
Line 2**

**Mailing Address  
City**

**Mailing Address  
State**

**Zip Code**



**You may also mail this form to:**

**Johnson County Wastewater  
Attention: Customer Service  
11811 S Sunset Drive, Suite 2500  
Olathe, Kansas 66061**

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