



THIKA WATER & SEWERAGE COMPANY LTD.

REQUEST FORM

I..... (Name) Account No:

ID No..... Telephone No..... Date.....

(A) TERMINATING THE CONTRACT

Final bill payment amount.....

Receipt No:

Deposit receipt No: (Attach original copy)

Meter returned to (Name) Signature.....

(B) CHANGE OF ADDRESS

Kindly change my address to read:

FROM P.O BOX..... CODE NO..... TOWN.....

TO P.O BOX..... CODE NO..... TOWN.....

Customer Signature.....

(C) CHARGE STANDING CHARGES AFTER SUSPENSION OF ACCOUNT.

Account No.....

From..... (Date)

To..... (Date)

(D) CHARGE STANDING CHARGES-NO CONSUMPTION

Account No.....

From..... (Date)

To..... (Date)

FOR OFFICIAL USE

Request forwarded to:

Water

Sewer

Tariff

Meter

Billing

F.M / Audit

Billing

Charges

Charges

Repl.

Name.....

Signature.....

Date.....