

FINAL NOTICE: INTENT TO DISCONNECT UTILITY SERVICES

Date: [Insert Date]

Customer Name: [Insert Customer Name]

Service Address: [Insert Service Address]

Account Number: [Insert Account Number]

Dear Customer,

This letter serves as official notification that your municipal utility services are scheduled for disconnection on **[Insert Disconnection Date]** due to an unpaid balance on your account.

Account Summary:

- Past Due Amount: \$[Insert Amount]
- Late Fees/Penalties: \$[Insert Amount]
- **Total Amount Required to Avoid Disconnection: \$[Insert Total Amount]**

To prevent the interruption of your services, payment must be received in full by [Insert Time] on [Insert Deadline Date].

Payment Options:

- Online: [Insert Website URL]
- By Phone: [Insert Phone Number]
- In Person: [Insert Office Address]

Please note that if service is disconnected, you may be required to pay the full balance plus a reconnection fee of \$[Insert Fee Amount] before service is restored. Restoring service may take up to [Insert Number] business days.

If you have already made this payment or wish to discuss a payment arrangement, please contact the Billing Department immediately at [Insert Phone Number].

Sincerely,

[Insert Department Name]

[Insert Municipality Name]