

# City of Morro Bay Water Turn Off Request

**Print, complete, and mail to:**

**Water Department  
595 Harbor  
Morro Bay, CA 93442  
Ph: 805-772-6222  
Fax: 805-772-7329  
WaterBilling@morrobayca.gov**

Office Use Only	
Account Number:	_____
Meter Number:	_____
Current Reading:	_____
Previous Reading:	_____
Date:	_____

I hereby authorize water to be turned off at: \_\_\_\_\_

(Address)

on: \_\_\_\_\_

(Date)

**Check One:**

Owner

Tenant

*Forwarding Billing Name*

*Mailing Address*

*Mailing Address Line 2*

*Mailing City, State, Zip Code*

*Phone Number*

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*Signature Required*