



REPUBLIC OF THE PHILIPPINES
METROPOLITAN NAGA WATER DISTRICT
 40 J. Miranda Avenue, Naga City
 473-8438/ 0919-648-6369/ 0927-463-5596

ADMINISTRATION AND FINANCE GROUP
 COMMERCIAL SERVICES DEPARTMENT
CUSTOMER SERVICES DIVISION

WATER SERVICE DISCONNECTION APPLICATION

Please complete all sections of this application

AIO NO.:

DATE:

APPLICANT'S NAME [Last Name, Given Name, Name Extension, Middle Name/ Name of Institution]	ACCOUNT NO.	CONTACT NO.
ADDRESS	METER NO.	READING

I HEREBY APPLY FOR WATER SERVICE DISCONNECTION DUE TO

- PERSONAL REASON
 NO OCCUPANT
 WITHDRAWAL OF AUTHORIZATION
 OTHERS: _____
 FOR SUB-CONNECTION

TERMS AND CONDITIONS

I hereby certify that I have no previous or outstanding accounts with the District, the former National Waterworks and Sewerage System (NAWASA) or the Metropolitan Waterworks and Sewerage System (MWSS).

I hereby grant the District unrestricted access to my lot, property, residence or structure to enable them to effectively perform their official duties;

I understand that **NO ONE EXCEPT THE DISTRICT** shall at any time and in any manner operate, interfere or tamper with any part or component of the entire Metropolitan Naga Water District water-supply system. Violators shall be subjected to the sanctions of Section 31 (d) of the Provincial Water Utilities Act of 1973, as amended, and the Water Crisis Act and relevant provisions of the MNWD Utility Rules and Regulations and shall also be subjected to pay for any damage inflicted on affected MNWD properties;

I understand that should I need the service again, I shall notify the District and apply for reconnection of water service;

I understand that a full payment of arrears and a reconnection fee of P500.00 shall be paid if reconnection is requested;

I agree to abide with all the foregoing.

APPLICANT	LOT OWNER	HOUSE/BUILDING OWNER
Signature over Printed Name	Signature over Printed Name	Signature over Printed Name

Please do not write below this line [to be filled-up by MNWD personnel]

REQUIREMENTS

- Any valid ID w/ picture and signature of the line owner or his/her authorized representative (PHOTOCOPY)
 Any valid ID w/ picture and signature of the lot owner or his/her authorized representative (PHOTOCOPY)
 Type of Authorization : _____
 Name of Representative : _____
 Certification for LGU-Assisted Applicants (ORIGINAL)
 Relationship : _____

DISCONNECTION DATE	LAST READING	METER NO./ TYPE/ SIZE

STATEMENT OF ACCOUNT

PARTICULARS	AMOUNT	REMARKS
WATER BILL	P	
OTHERS		
TOTAL	P	
PAID UNDER OR No./ DATE		

PREPARED	RECOMMENDING APPROVAL	APPROVED
SILVE B. CAO CUSTOMER SERVICE ASSISTANT D	CHERRY GRACE R. REGMALOS OIC DISCONNECTION & RECONNECTION SECTION	RICARDO B. FELIX III DIVISION MANAGER A