TOWN OF LUCAMA
Utilities & Billing
111 S. Main St., P.O. Box 127
Lucama, NC 27851
Phone: 252-239-0560
Fax: 239-239-9707
utilities@townoflucama.net

Account # _____

UTILITY DISCONNECT REQUEST

Customer Name: _____

Current Service Address: _____

Requested Disconnect Date: _____

The Town of Lucama **DOES NOT** guarantee same day disconnects. Requests made will be completed within 1-2 business days.

Forwarding Address for final bill: _____

Phone Number: _____ _____
current phone number phone number that is valid after your move

By signing below, I acknowledge that I am responsible for any unpaid balance. I also acknowledge that any past due unpaid balance will be transferred to any existing or new Town of Lucama utility account. I also understand that the Town of Lucama may place a garnishment on any state tax refund and/or submit to a collection agency if I do not pay the balance in full.

_____ _____
Signature **Date**