



Relinquishment of Utility Deposit

I, _____, relinquish my deposit in the amount of \$_____.

to _____ for service address at: _____.

Date: _____

Last 4 of Social Security #: _____

Name: _____

Signature: _____

**This form may be faxed to 940.365.1215
or
Hand delivered to City Hall at 107 S. Main
or
Dropped in the drop box at City Hall**

Received: _____

Processed: _____