

# RELINQUISH OF DEPOSITS AND NAME REMOVAL



## CITY OF LAMPASAS PUBLIC UTILITIES

312 East Third Street, Lampasas, Texas 76550  
512-556-3641/fax 512-556-2074

### CUSTOMER INFORMATION:

Customer(s) Name: \_\_\_\_\_

Customer(s) Address: \_\_\_\_\_

Customer Account # \_\_\_\_\_

I, \_\_\_\_\_, authorize the City of Lampasas Public Utilities to remove my name from the account listed above and I further agree to relinquish the deposits on the account to

\_\_\_\_\_.

*I understand that by signing this I am releasing any claim to the above referenced account.*

\_\_\_\_\_  
Signature of Customer

\_\_\_\_\_  
Date

### OFFICE USE ONLY:

Date: \_\_\_\_\_

Clerk: \_\_\_\_\_

Account updated: \_\_\_\_\_