



TOWN OF
HILLSBOROUGH

REQUEST Utility Disconnection

Billing and Collections Division | Financial Services Department
105 E. Corbin St., PO Box 429, Hillsborough, NC 27278
919-296-9450

CustomerService@hillsboroughnc.gov
www.hillsboroughnc.gov

Please allow up to three business days to disconnect services.

The deposit on file will be applied to your last utility bill. Any remaining deposit will be returned to you via check and mailed to the forwarding address provided below. Please allow 30 days to receive your deposit refund check.

Date to Disconnect Service: _____

Service Address to Disconnect: _____

Account Holder's Name: _____

Account Number: _____

Forwarding Address: _____

Home Phone: _____ Mobile Phone: _____

Email: _____

Last Four Digits of Social Security Number: _____

If Under Business Name, Enter Tax Identification Number: _____

I hereby agree to conform to all applicable laws and regulations of the Town of Hillsborough, County of Orange, and State of North Carolina (as may be applicable to my request) and certify that the above information is true and accurate to the best of my knowledge.

Account Holder's Signature: _____ Date: _____