



METER DISCONNECT FORM

4831 Eagle Street
Anchorage AK 99503-7497
1-800-478-1818
1-800-478-2389 (Fax)

Date: _____ I (We) hereby request disconnection of electric service at the location indicated below

Meter Serial Number: _____

Name: _____

Joint Member Name: _____

Current Address: _____ City: _____ State: _____ Zip: _____

Forwarding Address: _____ City: _____ State: _____ Zip: _____

Requested Date of Disconnection: _____

If service is to be disconnected and not transferred (during winter months)

Is the customer owner of the service Yes No If not who is the owner? Provide information below.

Name: _____

Phone: _____

Does the service have running water? Yes No

If yes, has service been winterized? Yes No

X

Signature of Applicant

Name of Firm or Agency

To be filled out by AVEC Representative:

Disconnection Date: _____

Reading at time of removal: _____

Meter Serial Number: _____

Reading at Connection: _____

Was the meter pulled and physically stored in the plant? Yes No

If meter was pulled was the Socket meter blank and AVEC seal installed? Yes No

Note: Service must have a cover to protect children and others

If not, was service transferred to another person? Yes No If yes, provide information below

Name: _____

Phone: _____

For Location with Automatic Meter Reading meters:

Do not physically pull meter prior to contacting AVEC headquarters

Please call AVEC headquarters to arrange for online disconnections prior to faxing paperwork..

Name and Signature of AVEC Representative that completed the Service Disconnect Form:

Name

X

Signature

Name of AVEC Headquarters Employee Contacted: _____

As soon as paperwork is completed, please fax to **1-800-478-2389**, then mail the originals to AVEC

HEADQUARTERS USE ONLY

Account # _____ Location # _____

Route: _____

Rate: _____ Entered By: _____

Elster _____

SO/WO # _____ Date Entered _____