



106 A Ave., PO Box 208
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Utility Shut Off/Turn On Request

I wish to have the following **Utilities:** **Water** **Sewer** **Dump**

Turned: **On** **Off**

On this day: _____
 (Date)

At the following address: _____
 (Street)

 (City, State, Zip)

Account Number: _____

Special Instructions: _____

 Name (Print)

 Signature

 Date