

LAKEHURST WATER & SANITATION DISTRICT

PHONE: 303-985-7895

FAX 303-988-7291

www.lakehurstwater.org

FINAL BILL REQUEST

Closing Date to Read Meter _____

PROPERTY ADDRESS _____

Send Final Bill To: (name) _____

Street _____

City _____ **Zip** _____

Send Future Bills To:(name) _____

Street _____

City _____ **Zip** _____

Final requested by: name _____ **Phone:** _____

Fax: _____

TRANSFER FEE \$15 ON FINAL BILL

CALL LAKEHURST TO RECEIVE STATUS

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ACCT # _____ **for office use**

Current reading _____ **ERT #** _____

Prev Reading _____

Gals used _____

Final bill calc _____

Prev bal _____

Total Final sent _____

**Edit,out \$15,mtr read,close,in,close,postch,print,calcbill,print,
Set due date,create stm,printstm,closecycle**