



**CITY OF COLUMBUS
REQUEST FOR ABANDONMENT OF WATER AND/OR SEWER SERVICE**

PROPERTY INFORMATION

Service Address:

Parcel ID / Legal Description:

Property Owner Name(s):

Mailing Address:

Phone: _____

Email: _____

TYPE OF ABANDONMENT REQUESTED

(Select all that apply)

Abandon Water Service

Abandon Sewer Service

REASON FOR REQUEST

ACKNOWLEDGEMENTS (REQUIRED)

By signing below, I/we acknowledge and agree to the following:

1. **Monthly Base Rates**
I understand that, under City Code, once municipal water service has been established to a parcel, the monthly minimum base rate is required to be paid 12 months per year until the City approves this abandonment request.
2. **Billing Continues Until Approval**
I acknowledge that billing for minimum base rates will continue until the City provides written approval of abandonment.
3. **Effect of Abandonment**
If the City approves this request, water service will be permanently abandoned at this property, and the City may require the service line to be disconnected at the main or otherwise rendered inactive in accordance with City standards.
4. **Future Re-Establishment of Service**
I understand that if water service is reestablished in the future:
 - All system development fees, hookup fees, tap fees, and related charges in effect at the time of reestablishment must be paid in full, and
 - The water/sewer service line, meter pit, curb stop, vault, and associated components must meet all current City ordinances, resolutions, and construction standards.
5. **Nonconforming or Unapproved Connections**
If the City identifies an existing nonconforming or unapproved connection, I acknowledge that I am responsible for all costs to bring the property into compliance with current standards, including any required disconnection at the main.

PROPERTY OWNER CERTIFICATION

I/we hereby request abandonment of municipal water/sewer service to the above-listed property and certify that all information provided is true and correct. I understand the obligations and consequences associated with abandonment.

Owner Signature: _____ Date: _____

Owner Printed Name: _____

Co-Owner Signature (if applicable): _____ Date: _____

Co-Owner Printed Name: _____

CITY USE ONLY

Date Received: _____

Approved Denied

Effective Date of Abandonment: _____

Reviewed By: _____
Peyton Brookshire, Public Works Director