



TURN OFF SERVICE REQUEST FORM

Site Information

Site Number:	C1182d	LOCATION TYPE:	Shore
Site Name:	Helena	REGION:	
Entity Name:		DIVISION:	
Federal Tax ID Number:	580687630	GL SITE #:	
Site Address 1:	606 N Sebastian St	Account Address 1:	
Site Address 2:		Account Address 2:	
Site City:	W Helena	Account City:	
Site State:	AR	Account State:	
Site Zip:	72390	Account Zip:	
Site Contact Name:	Lauren Sawyer	Existing Billing Address 1:	Aaron's Inc.
Site Contact Title:	Systems Analyst	Existing Billing Address 2:	c/o Aaron's Sales & Leasing
Site Contact Telephone:	618-402-3679	Existing Billing Address 3:	P.O. Box 5651
Site Contact Fax:		Existing Billing Address 4:	Bismark, ND 58506

LANDLORD INFORMATION

Leased Location:	YES / NO	Landlord Name:	
Lease Start Date:		Contact Number:	
Lease End Date:		Contact FAX:	
New Tenant:		Contact Email:	
Sublet:	YES / NO	Address 1:	
		Address 2:	
Owned Location:	YES / NO	City:	
Sale Date:		State:	
New Owner:	NO	Zip:	

SERVICES

Turn Off Date:	ASAP		
Require Meter Removal:	YES / NO		
Utility Service Type	Vendor Name	Account	Meter
Trash	West Helena Water	1400	

Special Instructions

Please terminate dumpster service only.



TURN OFF SERVICE REQUEST FORM

Site Information

Site Number:	C165810	LOCATION TYPE:	
Site Name:	El Cajon	REGION:	
Entity Name:		DIVISION:	
Federal Tax ID Number:	580687630	GL SITE #:	
Site Address 1:	558 North 2nd St	Account Address 1:	
Site Address 2:		Account Address 2:	
Site City:	EL CAJON	Account City:	
Site State:	CA	Account State:	
Site Zip:	92021-6448	Account Zip:	
Site Contact Name:	LAUREN SAWYER	Existing Billing Address 1:	Aaron's Inc.
Site Contact Title:	Systems Analyst	Existing Billing Address 2:	c/o Aaron's Sales & Leasing
Site Contact Telephone:	678-402-3679	Existing Billing Address 3:	P.O. Box 5651
Site Contact Fax:		Existing Billing Address 4:	Bismark, ND 58506

LANDLORD INFORMATION

Leased Location:	<input checked="" type="radio"/> YES / <input type="radio"/> NO	Landlord Name:	
Lease Start Date:		Contact Number:	
Lease End Date:	1/30/18	Contact FAX:	
New Tenant:	NO	Contact Email:	
Sublet:	YES / <input checked="" type="radio"/> NO	Address 1:	
		Address 2:	
Owned Location:	YES / <input checked="" type="radio"/> NO	City:	
Sale Date:		State:	
New Owner:		Zip:	

SERVICES

Turn Off Date:	2/1/18		
Require Meter Removal:	YES / NO		
Utility Service Type	Vendor Name	Account	Meter
Electric	SPGE	77048708212	06090897

Special Instructions

--



TURN OFF SERVICE REQUEST FORM

Site Information

Site Number:	C02460	LOCATION TYPE:	Store
Site Name:	Monroeville-PA	REGION:	
Entity Name:		DIVISION:	
Federal Tax ID Number:	580687630	GL SITE #:	
Site Address 1:	4089 William Penn Hwy	Account Address 1:	
Site Address 2:		Account Address 2:	
Site City:	Monroeville	Account City:	
Site State:	PA	Account State:	
Site Zip:	15146-2504	Account Zip:	
Site Contact Name:	Lauren Sawyer	Existing Billing Address 1:	Aaron's Inc.
Site Contact Title:	Systems Analyst	Existing Billing Address 2:	c/o Aaron's Sales & Leasing
Site Contact Telephone:	678-402-3679	Existing Billing Address 3:	P.O. Box 5651
Site Contact Fax:		Existing Billing Address 4:	Bismark, ND 58506

LANDLORD INFORMATION

Leased Location:	YES / NO	Landlord Name:	
Lease Start Date:		Contact Number:	
Lease End Date:		Contact FAX:	
New Tenant:		Contact Email:	
Sublet:	YES / NO	Address 1:	
		Address 2:	
		City:	
		State:	
		Zip:	
Owned Location:	YES / NO		
Sale Date:			
New Owner:			

SERVICES

Turn Off Date:	2/1/18		
Require Meter Removal:	YES / NO		
Utility Service Type	Vendor Name	Account	Meter
Electric	Agnes Light	9149-220-000	F76098646
Electric	WGL Energy Ser	"	"
Water	Monroeville Municipal Authority	9418-2	
GAS	Peoples	200004162729	5239115
GAS	Sprouge	12002324	

Special Instructions

--