City of Boerne
PO Box 1677
Boerne, Tx 78006
Attn: Billing Department

Account # _____ - _____ - _____

Name _____

Service Address _____

I hereby request cancellation of the Average Monthly Plan (AMP) Plan on my utility account effective **Date**:_____.

I understand that written notification is required at least twenty (20) days prior to the bill due date in order to cancel participation in the AMP Plan.

I acknowledge that upon cancellation, my account will be reconciled, and any resulting credit or balance due will be reflected on my next billing statement.

I further understand that I will not be eligible to re-enroll in the Average Monthly Payment Plan for a period of six (6) months following the cancellation date.

Signature _____ **Date** _____

You may email this form to billing@boerne-tx.gov. Please contact us with any questions or concerns at The City of Boerne Customer Care & Billing office at (830) 249-9511.