



32 South Main Street, Middleborough, MA 02346
Phone: (508) 947-1371 Fax: (508) 946-3700
E-mail: csr@mged.com

Service Disconnect Request

Please fill in the information below and insert your electronic signature in the correct format. If you have no electronic signature, please download the completed form, sign and scan to email or fax, or mail the original to our office.

Date: _____

Customer Name: _____

Service Address: _____

Phone #: _____

Account #: _____

Meter #: _____
(To be completed by office)

Last 4 Digits of Social Security #: _____

Service Disconnect Date: _____
(Monday – Friday only)

Closing Date (If you are the owner of the property): _____

Landlord Name (If you rent the property): _____

New Mailing Address: _____
(For your final bill)

The subscriber whose signature appears below, agrees to be responsible for any outstanding balance PLUS the Final Bill for services through the Disconnect Date.

Customer Signature: _____

Please verify with us that your information has been received.