

RESIDENTIAL ACCOUNT CLOSING FORM

SEND COMPLETED FORM TO:

MAIL: **1900 St. James Place, Suite 300, Houston, TX 77056**
 FAX: **832-565-7864**
 EMAIL: **support@TaraEnergy.com**

IMPORTANT: Please select one of the following two options. ARE YOU:

Switching Providers:
 Please consider this my 90 day termination notice. I understand that I will need to switch to another electricity provider within 90 days from the Termination Date listed below.

OR

Moving:
 I am moving from the address listed below and understand that my electricity service will be disconnected on the Termination Date specified below*.

ACCOUNT TO BE CLOSED:	
Tara Account No.:	Service Address:
ESI ID No.:	
Termination Date:	Contact No.:
New Address (if moving) for Final Bill:	

**Please note it can take up to five (5) business days to terminate electric service, and billing for electricity usage will continue until the actual termination date.*

AUTHORIZATION:

- I am at least eighteen years of age and legally authorized to terminate or disconnect service on this account (if not the account holder, please enclose a copy of a power of attorney).
- I have read and understand this Residential Account Closing Form.
- I understand that by signing this form, I am authorizing Tara Energy to disconnect electric service from the service address listed above.
- I understand that if I have not provided Tara Energy with proper notice as defined in my Agreement or, if moving, documentation confirming move) I may be liable for an Early Termination Fee.
- I understand that I am responsible for paying the Final Bill for services (and other fees, etc.) provided by Tara Energy on the account listed above.

Signature: _____ Last 4-Digits of SS# (or password): _____

Print Name: _____ Contact Number: _____

Date: _____