



## HERITAGE GROVE DEACTIVATION REQUEST FORM

**\*Only the person who signed up for cable may cancel\***

FSUID: \_\_\_\_\_

FSUSN: \_\_\_\_\_

Last Name: \_\_\_\_\_

First Name: \_\_\_\_\_

FSUCard #: 5894-3710 \_\_\_\_\_

FSU Email: \_\_\_\_\_

**Service Address (Location of Services)**

Address: \_\_\_\_\_

Apartment: \_\_\_\_\_

Contact Phone: (    ) \_\_\_\_\_

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**Billing Address (For Paper Invoice)**

Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_

Zip: \_\_\_\_\_ Phone: (    ) \_\_\_\_\_

Paper Invoice: \_\_\_NO \_\_\_YES (\$1.50)

*If none selected, you will receive an invoice email notification monthly.*

### SELECT SERVICE(S) TO DISCONNECT

Local Phone Service:

- Local Phone       Voicemail 5       Voicemail 10

Seminole Cable Vision:

- SCV Analog Cab     SCV Analog & Digital (all)     SCV Digital Only

SCV Digital Other:

- HDTV Only       DVR Only       HDTV/DVR
- Showtime       Cinemax       Starz!       The Movie Channel (TMC)
- Sports Tier Package

**Disconnect Date (if other than today):** \_\_\_\_\_ \*weekdays only\*

**Please Note:**

You will receive an email notification or paper invoice (if requested) by the 15th of the next month. You will be billed for the 1st day of this month through your disconnect date. This bill will be due by the last day of the month. If you are disconnecting digital service, you must return any digital boxes, cords, and remotes that were issued to The Office of Telecommunications 644 West Call Street. You must return all items within 5 business days from the disconnect date to avoid being charged (\$200-\$500).

**Signature:** \_\_\_\_\_ **Date:** \_\_\_\_\_

For office use only:

Box Return Date: \_\_\_\_\_ Rep: \_\_\_\_\_ Box #: \_\_\_\_\_