

### INSTRUCTIONS

Complete this form and submit it in person or by mail to the following address.

**NOTE:** For Sign Administration Advance Pay Accounts include: **Attn: Sign Administration**  
For all other Advance Pay Accounts include: **Attn: Permits Office**

#### If delivered by FedEx or UPS

1002 Washington Ave  
Houston, TX 77002

#### If delivered by USPS

City of Houston  
P.O. Box 2688  
Houston, TX 77252-2688

DATE: \_\_\_/\_\_\_/\_\_\_

### REQUESTOR INFORMATION

Requestor Name: \_\_\_\_\_ Phone No: \_\_\_\_\_

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

### ACCOUNT INFORMATION

Advance Pay Account Number: \_\_\_\_\_

Reason for Closing Account: \_\_\_\_\_

Account Balance Payable To: \_\_\_\_\_ Contact Phone No.: \_\_\_\_\_

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

**Note:** If the business will be closed, the payment will be mailed to the address on the driver's license or identification. Please provide a copy.

\_\_\_\_\_  
APPLICANT'S PRINTED NAME

\_\_\_\_\_  
APPLICANT'S SIGNATURE

Sworn to and subscribed before me, and the undersigned authority on this \_\_\_ day of \_\_\_\_\_,  
\_\_\_\_\_

\_\_\_\_\_  
NOTARY PUBLIC IN AND FOR THE STATE OF TEXAS

\_\_\_\_\_  
MY COMMISSION EXPIRES

(SEAL)

**FOR OFFICE USE ONLY**

**APPROVED**

ACCOUNT BALANCE: \_\_\_\_\_

CUSTOMER SERVICE REPRESENTATIVE: \_\_\_\_\_

**APPROVING AUTHORITY:** \_\_\_\_\_

**DATE:** \_\_\_\_\_

**NOT APPROVED**

REASON: \_\_\_\_\_

\_\_\_\_\_

CUSTOMER SERVICE  
REPRESENTATIVE: \_\_\_\_\_