



# CITY OF LEOTI

Council Meeting  
1<sup>st</sup> & 3<sup>rd</sup> Monday – 6:30 p.m.

## DISCONNECTION OF SERVICES

<b>Name</b>			
<b>Address</b>			
<b>City</b>		<b>State</b>	<b>Zip Code</b>
<b>City Account Number(s)</b>			

- Water/Sewer       Sanitation/Landfill       Yard waste (only disconnected after service agreement fulfilled)

Billing Address for Final Bill:

<b>Name</b>		
<b>Mailing Address</b>		
<b>City</b>	<b>State</b>	<b>Zip Code</b>

This is authorization for the City of Leoti, City Clerk to discontinue the selected service.

To be effective	
Authorized Signature	Date

Comments

Receiving Agent \_\_\_\_\_ Date \_\_\_\_\_