



Sevier County Utility District
Natural Gas Service Disconnect Request Form

Date: _____

Natural Gas Account Number: _____

Name on Account: _____

Phone Number: _____

Service Address: _____

Date for Disconnection: _____

New Mailing Address: _____

Signature: _____ Current Date: _____

(signature is required)

Please Sign & Fax to 865-774-1649 or Mail to: Sevier County Utility District
Attn: Customer Service
P.O. Box 4398
Sevierville, TN 37864-4398

FOR OFFICE USE ONLY

DATE RECEIVED: _____

DATE PROCESSED: _____

EMPLOYEE: _____