



REQUEST TO TERMINATE WATER/SEWER

DATE _____

ACCOUNT# _____

NAME _____

ADDRESS _____

EFFECTIVE DATE _____

CLOSING DATE OF SALE OR END OF LEASE

FORWARDING ADDRESS _____

PHONE NUMBER _____

LANDLORD NAME _____

LANDLORD ADDRESS _____

LANDLORD PHONE NUMBER _____

SIGNATURE _____

DATE _____

Points of Contact:

TIFFANY LEASURE Ext 207 / tiffany@cityofgretna.com

JENI ROSENBAUM EXT 216 / jennifer@cityofgretna.com

Utility Billing Clerk

P.O. Box 69

204 N McKenna Ave

Gretna, NE 68028