

## CITY OF ALGOOD P.O. Box 49215, 215 West Main Street Algood, TN 38506

## **DISCONNECT UTILITY WATER SERVICES**

□ Water

□ Irrigation Only

Service Address to Disconnect			
Street:		Apt #	
	State:		
Customer Information:			
Customer Name:			
Phone:			
Forwarding Address:			
Street:		Apt #	
	State:		
Please disconnect the service at t			
not paid and the balance due has for collection fees, attorney fees,	oill and that I'm responsible for the final be to be sent to an outside agency for collection court costs, etc.	oill. I understand if the bill is ection, I will be responsible	
Customer Signature:	D	Date:	
Notes:			
Completed By: Date Completed	eted: Service Order #	Account #	