

TERMINATION AND DISCONNECTION OF GAS

METER AND/OR SERVICE LINE

I, _____ do hereby authorize the Jasper Gas Department to:

- _____ Remove Meter Set
- _____ Remove Service Line from Gas Main & Meter Set

Account Number: _____

Located at: _____, Jasper, IN.

I understand that I/We are responsible for the cost to remove the meter set and/or service line, and will pay such costs within 30 days of receiving the invoice.

Name

Title

Date

Received by JMU Employee (Office Use Only)

Title