

# Grayson Utilities Commission

671 S State Highway 7  
Grayson, Kentucky 41143  
Phone: (606) 474-7569  
Fax: (606) 474-2662

## Permanent Removal of Gas Service Form

Date: \_\_\_\_\_

Customers Name: \_\_\_\_\_

Account Number: \_\_\_\_\_

Meter Serial Number: \_\_\_\_\_

I, the property owner, am requesting that the gas tap be permanently removed at the following address:

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

It has been explained and I understand that it will be necessary to purchase a new gas tap to renew service at a future date.

**Property Owner:** \_\_\_\_\_

**Witness:** \_\_\_\_\_

**Witness:** \_\_\_\_\_