

City of GIBBON

715 Front Street
Gibbon NE 68840

I/We, _____ owner(s)/renter(s)
in Gibbon, Nebraska would like to request discontinued service of utilities at the address of
_____ on _____ (date).

Forwarding address for final bill:

Phone: _____

Address: _____ City: _____ State: _____ Zip: _____

(*If this customer address is in good standing and still holds a deposit; the deposit will be applied to the last payment)

Owner(s)/Renter(s) Signature

For office use only

Final Water Meter Reading: _____

Final Garbage Count: _____

Gibbon City Signature: _____

Date Completed: _____