

PUBLIC WORKS DEPARTMENT

To:	The City of Sevierville	
l,		
(Na	ame – please print)	
of	usiness/Residence Address)	
(Bu	usiness/Residence Address)	
have can	ncelled all City of Sevierville S	ervices.
	that in doing so, I am not eligincluding, but not limited to	gible for any City of Sevierville Sanitation
	Trash Collection	
	Leaf Collection Brush and Grass Collecti	on
	Rubbish (junk) Collection	
My alter	native method of garbage di	sposal is (address of disposal site):
	tand that if I wish to reinsta statement fee.	te the services, I will be responsible for a
(Signature)		(Date)
Received	i :	
(Signature)		
(Remarks)		