

VILLAGE OF PULASKI

UTILITIES DISCONNECT VERIFICATION

TO: Village of Pulaski Building Inspection Department

RE: \_\_\_\_\_  
Location Type of Structure

As representative of the Natural Gas Company servicing this location, I hereby certify that the utilities which are our responsibility and location at the above described property, were properly disconnected on

DATE \_\_\_\_\_  
Signature/Title \_\_\_\_\_  
Name of Utility \_\_\_\_\_

As representative of the Electric Utility servicing this location, I hereby certify that the utilities which are our responsibility and located at the above described property, were properly disconnected on

DATE \_\_\_\_\_  
Signature/Title \_\_\_\_\_  
Name of Utility \_\_\_\_\_

As representative of the Water Utility servicing this location, I hereby certify that the utilities which are our responsibility and located at the above described property, were properly disconnected on

DATE \_\_\_\_\_  
Signature/Title \_\_\_\_\_  
Name of Utility \_\_\_\_\_

As the Plumbing Inspector for the Village of Pulaski, I hereby certify that the SANITY SEWER at the above described property, was properly disconnected on

DATE \_\_\_\_\_  
Signature \_\_\_\_\_

\_\_\_\_\_  
Submitted By Title

\_\_\_\_\_  
Address Phone

**NOTE: This form must be completed and submitted to apply for a razing permit.**