

SEPARATION NOTICE

Employee's Name _____ SSN _____

Address _____ City _____ State _____ Zip _____ Phone _____

Termination Date: _____ Position _____

Job Name _____ Job # _____

Job Address _____ City _____ State _____ Zip code _____

Reason for Separation:

Lack of Work _____ Discharge _____ Quit _____

If other than lack of work, explain the circumstances of the separation:

I certify that the above employee has been separated from work and the information furnished heron is true and correct.

Representative of Huxtable Electric, Inc.

Employee Signature or Witness

Title

Date



1580 Championship Blvd.
Franklin, TN 37064
(850) 420-4527
(843) 225-1458 (fax)