



RENTAL WATER/SEWER AFFIDAVIT

Property Information

Address & Unit	Tax ID : 4717-
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Owner Information

Name	Driver's License Number or Corporate ID Number	
Permanent address	Home Phone	Business Phone
City	State	Zip Code
e-mail Address		

Tenant Information

Name	Driver's License Number
Home Phone	Business Phone

I hereby certify that the above information is correct and that the lease for the property listed above contains a provision holding the tenant responsible for water services and sewage disposal services on said premises. The date of execution of the lease is _____, and the expiration date of the lease is _____.

- The tenant is responsible for service. A cash deposit in the amount of \$200 and a copy of the lease is included with this affidavit.

Owners Signature

Date

NOTARY

Subscribed and sworn to by _____, before me on the ____ day of _____, 20__.

 Signature of Notary

 Name of Notary

State of _____, County of _____

My Commission Expires _____

Acting in the County of _____

**Notary is available at City Hall*

Office Use Only:	Date Deposit Received _____	Cash or Check #: _____
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Per City of Howell Ordinance 1044.09