

City of Klamath Falls  
Utility Billing Department  
500 Main St, Klamath Falls, OR 97601  
(541) 883-5301 Billing (541) 882-1418 Fax  
TTY (541) 883-5324 (Hearing Impaired)

**UTILITY SERVICE AUTHORIZATION FORM  
FOR LANDLORDS**

NAME OF PROPERTY OWNER: \_\_\_\_\_  
(Please print)

MAILING ADDRESS:  
\_\_\_\_\_  
\_\_\_\_\_

PHONE NUMBER: \_\_\_\_\_

SOCIAL SECURITY NUMBER: \_\_\_\_\_

DATE OF BIRTH: \_\_\_\_\_

DRIVERS LICENSE NUMBER: \_\_\_\_\_

I hereby request the City of Klamath Falls automatically put the utility service for my rental property (or properties) listed below in my name when a tenant moves out, so there is no interruption of service. I am the owner of the rental property, and I agree to pay for such service and to comply with all rules and regulations of the City of Klamath Falls, either now in effect or as amended in the future. The account will remain in my name until a new tenant signs up for the service or ***I notify you in writing*** that I will no longer be responsible for the service at this address.

ADDRESS	LOCATION NUMBER
1. _____	_____
2. _____	_____
3. _____	_____
4. _____	_____
5. _____	_____
6. _____	_____

\_\_\_\_\_  
Signature of Property Owner

\_\_\_\_\_  
Date

