



City of Soap Lake Utility Bill Transfer Consent Form



City of Soap Lake
P.O. Box 1270 – 239 2ND Ave S.E.
Soap Lake, WA 98851 – (509) 246-1211

Owner Authorization for Renter to Receive the Utility Bill and Affidavit of Responsibility

DATE _____ UTILITY ACCOUNT NUMBER _____

PROPERTY ADDRESS _____

OWNER'S NAME _____

OWNER'S ADDRESS _____

I, _____, by my notarized signature on this form do hereby authorize (renters name) _____, renter of my property at (property address) _____,

to receive the water/sewer/solid waste utility bill at the following address (renter's mailing address - **please print**) _____ and affirm that I

understand that I, the owner of the property, am still held liable for payment of the utility bill on this property.

Dated this _____ day of _____, 20_____

Signed _____

State of _____

County of _____

Signed or attested before me on the _____ day of _____, 20_____.

Notary Public

Commission Expires