



LANDLORD UTILITY ARREARS NOTIFICATION REQUEST FORM

I declare that I am the owner/property manager for the following property addresses:

| | |
|--|--|
| 1. | |
| 2. | |
| 3. | |
| 4. | |
| 5. | |
| 6. | |
| 7. | |
| 8. | |
| 9. | |
| 10. | |
| **For additional properties, please attach a separate signed sheet. | |

And THAT I would like to participate in the City's tenant arrears notification process using the following contact information:

Email Address:

Phone Number:

Name (or Business Name):

Address Line 1:

Address Line 2:

City:

Province/State:

Postal/Zip Code:

I understand that I am wholly responsible for the accuracy of and keeping up to date the information provided to the City in this document and that the City will for each arrears event on each account use the **email address provided firstly for all notifications**, and only use the phone number provided for notification in the event email is not available. I further acknowledge that upon delivery of such notification, responsibility to act upon any arrears with the tenant rests with myself.

Signed:

Dated: