



CITY OF MONROE
806 WEST MAIN STREET
MONROE WA 98272
(360) 794-7400 phone / (360) 794-4007 fax

OWNER PERMISSION FOR PROPERTY MANAGEMENT COMPANY

Owner Name _____ Owner Phone # _____

Property Address _____ City _____

State _____ Zip _____

I hereby give permission to _____ property management company to authorize any tenant change, name change, receive utility delinquent utility notices, or other related changes necessary to the utility billing located at the property listed above or attached, on my behalf.

*****If multiple properties applicable, please attach list of properties authorized.**

In consideration of the City's efforts in billing my tenant(s) directly, I, _____, owner of the property identified above, request copies of my tenants utility bills and delinquency notices and agree to be responsible for and to pay any and all utility charges from the City of Monroe that remain unpaid by my tenant(s). Furthermore, I expressly authorize and consent the City of Monroe to file and record liens on my aforementioned property as security for the payment of any and all such charges.

Owner signature _____ Date _____