



Mossy Head Water Works, Inc.

HOMEOWNER PERMISSION FORM TO TURN ON WATER

(Letter of permission for change water utility service into renter's name)

CUSTOMER /TENANT INFORMATION:

Please print

Tenant / Resident Name: _____

Street Address: _____ Unit #: _____

City: DeFuniak Springs State: FL Zip: _____

Telephone #: _____ Cell #: _____

I as a tenant at the above mentioned property, represent that I am at least 18 years of age and have provided accurate information to landlord and Mossy Head Water Works, Inc.

Signature: _____ Date: _____

HOMEOWNER/ LANDLORD'S INFORMATION

Property/ Service Address: _____

Homeowner/ Landlord's Name: _____

Street Address: _____ Unit / Apt #: _____

City: _____ State: _____ Zip: _____

Telephone #: _____ Cell #: _____

I _____, as the landlord/ owner of the above mentioned property have the authority to sign this letter of permission and hereby authorize _____

_____ to establish water with Mossy Head Water Works, Inc. I understand that this gives permission to turn on water, but does not guarantee transfer. I will notify Mossy Head Water Works, Inc. if I have a specific date I want the water shut off in my name.

Signature: _____

Date: _____