

HARDWICK ELECTRIC DEPARTMENT  
P.O. BOX 516  
HARDWICK, VT 05843  
PHONE - 802-472-5201 FAX - 802-472-6769

LANDLORD/AGENT VERIFICATION

Please fill out the below informatin pertaining to the rental unit:

\_\_\_\_\_  
Account Number

\_\_\_\_\_  
Meter Number

\_\_\_\_\_  
Apt #

\_\_\_\_\_  
Street Location

\_\_\_\_\_  
Name of Renter (s)

\_\_\_\_\_  
Effective Date

\_\_\_\_\_  
Signature of Owner or Agent

\_\_\_\_\_  
Today's Date

PLEASE BE AWARE THAT ANY UNPAID BILLS LEFT BY A TENANT BECOMES A LIEN ON THE PROPERTY AS STATED IN OUR TOWN TARIFF.

I, \_\_\_\_\_ do hereby authorize my landlord access to my electric account information.

\_\_\_\_\_  
Signature of Tenant (s)

\_\_\_\_\_  
Today's Date