



LANDLORD AGREEMENT APPLICATION

Owner's Name _____
Service Address _____
Mailing Address _____
City _____ State _____ Zip Code _____
Telephone () _____ Social Security # ____-____-_____

If you wish to have your account balance automatically deducted from your bank account, please provide a voided check.

LIST THE STREET ADDRESS OF EACH SINGLE FAMILY PROPERTY OWNED

1. _____ 2. _____
3. _____ 4. _____
5. _____ 6. _____

IMPORTANT NOTICE!

When you no longer require Louisville Water Company to maintain a Landlord agreement for your property, please call us at (502) 583-6610 or toll-free at 1-888-535-6262 to speak with a customer service professional and request that the Landlord agreement be removed from the property.

I hereby authorize Louisville Water Company to transfer water service into my name for the above stated address(es) once the tenant has taken service out of his/her name. Please note, if a tenant's service is turned off for non-payment, service will revert to the Landlord.

Landlord's Signature _____ Date _____