Send Completed Form to:

**City of Raleigh**

**Customer Care & Billing**

**PO Box 590**

**Raleigh, NC 27602-0590**

**Phone: 919.996.3245 Email:** [**UtilityBilling@raleighnc.gov**](mailto:UtilityBilling@raleighnc.gov)

Account Holder Name: Account Number: Authorizing Owner/Agent (if different than Account Holder Name): Daytime Phone Number: Mailing Address:

Last 4 digits of SSN: or Tax ID:

To comply with the Fact Act of 2003 and to prevent and mitigate ID theft, it is essential that written communication received by the Utility Billing Division contains the last four digits of the account holder’s social security number or the tax identification number. A daytime phone number is requested in the event that a Utility Billing staff member needs to obtain additional information to validate identity.

**Individual property addresses and/or account numbers to include in this program:**

*For more than 10 properties, please submit additional form(s)*

1.

2.

3.

4.

5.

6.

7.

8.

9.

10.

**Authorizing Owner/Agent’s Signature: Date:**

***IMPORTANT INFORMATION:***

Notification of change in tenants must be communicated to the Utility Billing Division timely to ensure proper billing.

After a tenant stops service and the landlord’s account becomes active, the landlord will be responsible for all services and charges up until the time that a new tenant establishes service on their own account with the Utility Billing Division.

***Go Paperless -- Enroll in E-Bill Today***

Learn more at [**raleighnc.gov**](http://www.raleighnc.gov/)

*UBA-006*