



Landlord Program – Utilities Authorization Form

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

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.

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