

Landlord Letter

This form is to be completed by the landlord only

Dear Landlord, please complete this form if your resident does not have a utility account in their name.

Responsible parties on lease: _____

Unit Address: _____

Please verify this information by checking one of the boxes on each line:

1. Does this tenant rent the unit stated above? ☐ Yes ☐ No

2. Is this residence/unit shared with multiple families/households? ☐ Yes ☐ No

3. Does this tenant receive a subsidy? (HUD, Community Action, Section 8, etc.)? ☐ Yes ☐ No

4. Is your tenant allowed to put the utility bill into their name? ☐ Yes ☐ No

a) If no, explain why not: _____

b) If yes, your tenant will need to put the account into their name - this program may be able to help with the deposit.

5. Is your tenant's heating/electric cost billed as part of their stated monthly rent? ☐ Yes ☐ No

a) If yes, is their heating cost a flat fee or a variable (changes each month) fee? ☐ flat ☐ variable

b) If tenant is subsidized AND has a variable fee, please provide receipts or a ledger of their payments within the last 90 days.

6. Main Source of Heat used at this unit: ☐ Electric ☐ Natural Gas ☐ Fuel Oil
☐ Propane ☐ Other: _____

Landlord Name Printed: _____ Phone: _____

Landlord Signature: _____ Date: _____

Landlord/Manager Physical Address: _____

Landlord/Manager Email Address: _____

Thank you for your help to process your tenant's application! Please contact us with any questions.

Community Action Team • 125 N 17th St, Saint Helens, OR 97051 • Phone: 503-397-3511

energy@cat-team.org • Fax: 503-397-3290

Staff only: County Tax Assessor print out attached: ☐