



CITY OF KYLE-UTILITY BILLING DEPT.

100 W. CENTER STREET / P.O. BOX 40

KYLE, TX 78640

PHONE: (512) 262-3960

FAX: (512) 262-3965

LANDLORD AGREEMENT

I, _____ the legal owner of the property located at the following address:
(please print name)

, and agree to maintain

(SERVICE ADDRESS)

a deposit with the City of Kyle for water service on said property on a continuing basis so long as I own the property. I further agree to be responsible and pay for any water consumed when said property is not occupied.

Mailing Address, City, State, Zip Code

Phone Number

By signing this agreement, I understand and agree to the above.

Print Name

Signature

Date

FOR OFFICE USE ONLY:

EMPLOYEE INITIALS: _____

Account #: _____

Drivers License #, State _____

or Social Security # _____

DOB _____