



Landlord Agreement Application			
Owners Name			
Service Address			
Account Number			
Owners Mailing Address			
Home Phone Number			
Cell Phone Number			
Email			
Last 4 Digits of your Social Security		Drivers License Number	
Subdivision Name			

Landlord (Owner, Manager, Rental Agent or Other Responsible Party) for the rental unit located at the above stated address we will be responsible for, and will pay for, service at unoccupied rental unit until service is established in a new rental account. I understand that a deposit will be charged and held on the Landlord Account until the account is closed by the established Landlord.

A request to disconnect service does not constitute a request to remove that premise from the Landlord Agreement. Request for deletions to the Landlord Agreement must be submitted in writing.

Owners Signature \_\_\_\_\_ Date \_\_\_\_\_

**PLEASE RETURN THIS FORM AND REQUIRED DOCUMENTATION TO:**

City of Canton  
110 Academy Street  
Canton, GA 30114  
770-704-1502  
water@cantonga.gov