



Borough of Ellwood City
525 Lawrence Avenue
Ellwood City, PA 16117
Phone (724) 758-5576 or 5577
Fax (724) 758-2716

Landlord Authorization for Payment Extensions

This is to certify that the individual(s) named below is renting my property at the stated location. All utility bills should be sent to the tenant.

As per ordinance # 2245, any extended payment plan shall be subject to the property owner's written approval. This is needed **before the scheduled shutoff day**. The date is listed on the shut off notice which was mailed to you. Please complete the entire form and if needed you may fax it to the number listed above.

PLEASE PRINT

1. **Property Address:** _____

Tenant(s) Name(s) over 18 yrs. of age: _____

Of adults in residence _____

Tenant(s) Phone Number: _____

Tenant(s) Email Address: _____

2. **Landlord Name:** _____

Landlord Address: _____

Landlord Phone Number: _____

Landlord email address: _____ **Landlord Fax:** _____

Please circle one of the following

Do not agree

One time only

All future months for this tenant

Date: _____

Signature of Landlord

Received by _____

Date _____

Effective 9/15/2015