

# VERIFICATION OF OCCUPANTS



**CITY OF LAMPASAS  
PUBLIC UTILITIES**  
312 East Third Street, Lampasas, Texas 76550  
512-556-3641/FAX 512-556-2074

## CUSTOMER INFORMATION:

Customer(s) Name: \_\_\_\_\_

Customer(s) Address: \_\_\_\_\_

Customer Account # \_\_\_\_\_

I hereby state that I am the landlord/manager for the address listed above. The following person(s) are known to be living at the address listed above.

_____	_____
_____	_____
_____	_____
_____	_____

I understand that the City of Lampasas Public Utilities is committed to serving its customers and the above information will be used confidentially as a means for verifying occupants as they request service.

\_\_\_\_\_  
Signature of Landlord

\_\_\_\_\_  
Date

\_\_\_\_\_  
Telephone number

## OFFICE USE ONLY:

Date: \_\_\_\_\_

Clerk: \_\_\_\_\_

Account updated: \_\_\_\_\_