

## **Affidavit of Landlord**

Electric Service Identifier (ESI ID):	
Premise/Service Address:	
Premise City, State, Zip Code:	
Premise Occupancy Date:	
Landlord Name/Title:	
Landlord Mailing Address:	
Landlord City, State, Zip Code:	
Landlord Telephone Number (daytime):	
New Occupant Full Name*:	
New Occupant Mailing Address*:	
New Occupant City, State, Zip Code*:	
New Occupant Telephone Number*:	
	vacant and the landlord is establishing service in their name
*Populate with VACANT if property is v	
AUTHORIZATION  I affirm that I am the landlord to the above Servi occupant. I am confirming that the occupant list	ice Address and I am not associated with the previous ted above is not associated with the previous occupant for
AUTHORIZATION  I affirm that I am the landlord to the above Servi occupant. I am confirming that the occupant list which the switch hold was applied.	*
AUTHORIZATION  I affirm that I am the landlord to the above Servi occupant. I am confirming that the occupant list which the switch hold was applied.  (Landlord Signature)	ted above is not associated with the previous occupant for
AUTHORIZATION  I affirm that I am the landlord to the above Servi occupant. I am confirming that the occupant list which the switch hold was applied.  (Landlord Signature)	(Name, printed)
AUTHORIZATION  I affirm that I am the landlord to the above Servi occupant. I am confirming that the occupant list which the switch hold was applied.  (Landlord Signature)  (Date signed)  State of Texas County of	(Name, printed)
AUTHORIZATION  I affirm that I am the landlord to the above Servi occupant. I am confirming that the occupant list which the switch hold was applied.  (Landlord Signature)  (Date signed)  State of Texas County of	(Name, printed)  Date Notarized by (name or names of persons)