



# Town of Johnstown

## TENANT UTILITY FORM

Today's date: \_\_\_\_\_ Date lease starts: \_\_\_\_\_

Tenant Name: \_\_\_\_\_

Property Owner/Landlord Name: \_\_\_\_\_

Service Address: \_\_\_\_\_

Mailing Address: \_\_\_\_\_

Primary Phone: \_\_\_\_\_ Cell Phone: \_\_\_\_\_

Email Address: \_\_\_\_\_

Driver's License Number: \_\_\_\_\_ State: \_\_\_\_\_ Exp. \_\_\_\_\_

Do you want to receive the monthly newsletter electronically? (Please circle one) Yes/No

By signing on this form below, I acknowledge and allow the Town of Johnstown to contact me regarding any matters regarding my account by phone, email and/or automated service.

\_\_\_\_\_  
Signature of Tenant

\_\_\_\_\_  
Date

Please complete this form and return it to the Town of Johnstown at 450 S. Parish, Johnstown, CO 80534 or email the completed form to [utilitybilling@townofjohnstown.com](mailto:utilitybilling@townofjohnstown.com). The property owner will need to contact us to provide permission before you can be added to the account.

\*Properties that are not owner occupied will be charged a \$2.00 per month duplicate bill fee.

*The Community That Cares*

www.TownofJohnstown.com

P: 970.587.4664 | 450 S. Parish Ave, Johnstown CO | F: 970.587.0141