7-DAY NOTICE OF UTILITY SHUTOFF

TENANT(S):_____ DATE:_____
ADDRESS: _____ UNIT: _____
CITY: _____ STATE: _____ ZIP: _____

7-DAY NOTICE OF UTILITY SHUTOFF

This is your 7 day notice that your Landlord intends to temporarily shut off the following utilities for building repairs or rehabilitation.

_____ Water/Sewer _____ Electric _____ Gas

Date:_____

_____
Landlord

Certificate of Service

I hereby certify that I have served the foregoing Notice upon the Tenant listed above on _____
(Date)

_____ Personal Delivery

_____ Substitute Service on person 13 years or older and residing in or in possession of the premises

_____ Certified/Registered Mail with return receipt from addressee

_____ Posting (when no one is in actual possession of the premises)

_____
Landlord/Agent

PREVIEW ONLY

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