**Low-Income Household Water Assistance Program (LIHWAP)**

**Landlord Verification Form**

Applicant/Tenant name (please print):

Address:

Telephone Number:

Landlord/Manager name (please print):

Address:

Telephone number:

Email:

Is the applicant/tenant’s water and/or wastewater utilities included in the rent?

Is the applicant/tenant disconnected for a past-due water or wastewater bill?

Is the applicant/tenant in danger of a disconnection for past-due water or wastewater bill?

Cost of water/wastewater charged in monthly rent:

Water/wastewater company:

Account name:

Account number:

*If the applicant/tenant receives LIHWAP assistance, I agree to reduce the rental payment by that amount for the following month.*

Landlord/Manager Signature:

Date: