

Power Authorization Form

Date: _____

Occupant Name: _____

Property Owner: _____

Physical Address: _____

Mailing Address: _____

Phone #: _____

Electrical Provider _____

Type of Housing: _____

Conventional _____

Mobile Home _____

Other _____

Evans County Representative

Date

This form is required to anyone moving into a place of rental.

Date faxed _____ Time _____

Faxed by _____