



LANDLORD PROTECTION PROGRAM

The Grand Haven Board of Light & Power would like to identify rental properties and offer to the property owner a shutoff protection program.

The three types of protection options are as follows:

- READ:** This option would automatically transfer service to the property owner or designated property management's name when a tenant contacts the Grand Haven Board of Light & Power to have service discontinued unless a new tenant is moving in at the same time.
- ALL SHUTOFFS:** Property owner or designated property management agent may elect to have service transferred to their name if the service is to be disconnected for any reason, including nonpayment.
- SEAL:** Service at property is sealed when a tenant requests service to be disconnected. Services will remain off until a new tenant requests service or property owner or designated property management agent gives further instruction.

Please use the enclosed form to list rental properties serviced by the Grand Haven Board of Light & Power (including unit and/or apartment numbers) and check the type of shutoff protection applicable to each. Only one option can be selected per property.

Please contact Customer Service at 616-846-6250 with any questions you have concerning this program.

NOTE: Any changes in property ownership/property management agent must be reported immediately to our office. If you fail to update this information, you will be responsible for all charges incurred until updates are made.



AUTHORIZATION TO RELEASE PERSONAL AND ACCOUNT INFORMATION

I hereby authorize any entity, including but not limited to the City of Grand Haven and its Grand Haven Board of Light & Power, to release any and all of my account and personal information, including but not limited to my forwarding address, to the property owner or property management agent identified below and I agree to indemnify and hold harmless any entity that releases this information upon receiving a signed copy of this authorization form.

Rental Property Address

Customer Account Number (Grand Haven Board of Light & Power will complete)

| Printed Name of Renter/Tenant | Signature of Same | Date |
|-------------------------------|-------------------|-------|
| _____ | _____ | _____ |
| _____ | _____ | _____ |
| _____ | _____ | _____ |

Signature of Witness

Date

Printed Name of Witness

Name of Property Owner/Property Management Agent

Mailing Address of Property Owner/Property Management Agent

Contact Phone Number of Property Owner/Property Management Agent



Customer Service | p 616.846.6250 | f 616.846.3114 | e-mail customerservice@ghblp.org |

Landlord Protection Program

Protection Requested (check only one for each address)

| ADD Property Address: | Read | All Shutoffs | Seal |
|-----------------------|-------|--------------|-------|
| _____ | _____ | _____ | _____ |
| _____ | _____ | _____ | _____ |
| _____ | _____ | _____ | _____ |
| _____ | _____ | _____ | _____ |
| _____ | _____ | _____ | _____ |
| _____ | _____ | _____ | _____ |

Indicate any additional accounts on a separate sheet of paper.

_____ PLEASE CHECK HERE IF YOU ARE **REQUIRING** LIEN WAIVER DEPOSITS FOR YOUR TENANTS.
(Lien waivers require at least a \$400.00 deposit to start electric service.)

_____ PLEASE CHECK HERE IF YOU ARE **NOT** REQUIRING LIEN WAIVERS OR CANCELLING
AN EXISTING LIEN WAIVER POLICY.

Signature _____
Date (Required)

Owner Print Name: _____

Owner Mailing Address: _____

Owner Phone Number: _____

If you use a property management agent, please provide the information below.

Print Company Name and Contact Person: _____

Mailing Address: _____

Phone Number: _____

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Landlord Protection Program

DELETE Property Address:

Indicate any additional accounts on a separate sheet of paper.

Signature

Date (Required)

Owner Print Name: _____

Owner Mailing Address: _____

Owner Phone Number: _____

If you use a property management agent, please provide the information below.

Print Company Name and Contact Person: _____

Mailing Address: _____

Phone Number: _____

NOTE: Any changes in property ownership/property management agent must be reported immediately to our office. If you fail to update this information, you will be responsible for all charges incurred until updates are made.



LIEN WAIVER

RESPONSIBILITY FOR PAYMENT OF ELECTRIC ENERGY CHARGES

Tenant Name: _____

Service Address: _____

Property Owner/Management Name: _____

Property Owner/Management Address: _____

Property Owner/Management Phone Number: _____

Account Number (Provided by GHBLP) _____

I, the tenant(s) at the above service address, have agreed with the property owner/property management agent that I will be solely responsible for the payment of electrical energy charges and provide this as written notice of such to the Grand Haven Board of Light & Power in accordance with the Grand Haven Board of Light & Power Collection Policy in Section 7:02 (3) stating: "At the time service is requested by the tenant, the tenant shall provide a signed Lien Waiver form, a copy of the signed lease agreement, and a deposit in the amount of \$400.00 for residential property and two months estimated billing or \$600.00 minimum for commercial/industrial property."

Tenant Signature

Property Owner/Property Management

Date