## CITY OF LAWTON 212 SW 9<sup>TH</sup> ST LAWTON OK 73501 (580)581-3316 FAX

## LANDLORD/REALTOR PROGRAM APPLICATION

□ SOLE PROPRIETORSHIP □ PARTNERSHIP □ LIMITED LIABILITY CO  DATE DEPOSIT/SURETY BOND  FEDERAL ID# / SOCIAL SECURITY#: BUSINESS NAME: BILLING ADDRESS:  TELEPHONE NUMBER: EMAIL:  POINT OF CONTACT:  AUTHORIZED NAMES & SIGNATURES OF INDIVIDUALS RESPONSIBLE FOR FAXED IN REQUES  PRINT NAME  PRINT NAME  SIGNATURE  PRINT NAME  SIGNATURE	<b>OWNERSHIP OF ACCOUNT</b>	Γ	
DATE			□ OTHER
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THE ABOVE AUTHORIZED NAMES WILL BE RESPONSIBLE FOR ALL CONSUMPTION AND SUBSEQUENT CHARGES THEREOF, FOR THE LENGTH OF TIME THE ACCOUNT IS ESTABLISHED UNTIL SUCH TIME THE CITY OF LAWTON IS NOTIFIED THE ACCOUNT IS TO BE FINALED.

