

CITY OF LAWTON
212 SW 9TH ST
LAWTON OK 73501
(580)581-3316 FAX

LANDLORD/REALTOR PROGRAM APPLICATION

OWNERSHIP OF ACCOUNT

- SOLE PROPRIETORSHIP CORPORATION OTHER
 PARTNERSHIP LIMITED LIABILITY CO
-

DATE _____ DEPOSIT/SURETY BOND _____

FEDERAL ID# / SOCIAL SECURITY#: _____

BUSINESS NAME: _____

BILLING ADDRESS: _____

TELEPHONE NUMBER: _____

FAX NUMBER: _____ EMAIL: _____

POINT OF CONTACT: _____

AUTHORIZED NAMES & SIGNATURES OF INDIVIDUALS RESPONSIBLE FOR FAXED IN REQUESTS

PRINT NAME

SIGNATURE

PRINT NAME

SIGNATURE

PRINT NAME

SIGNATURE

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.

