

# Letter of Authorization

## Property Owner to Tenant or Agent



Hernando County Utilities Department  
15365 Cortez Blvd  
Brooksville, FL 34613  
www.hernandocounty.us  
E-Mail: hcudcs@hernandocounty.us  
Phone: 352-754-4037  
Fax: 352-754-4962

**Service Address:** \_\_\_\_\_

### Property Owner Information

**Owner Name:** \_\_\_\_\_

**Mailing Address:** \_\_\_\_\_

**State/Province:** \_\_\_\_\_

**Zip/Postal Code:** \_\_\_\_\_

**Phone Number:** \_\_\_\_\_

**Email:** \_\_\_\_\_

Please be advised that I, \_\_\_\_\_ (owner name)

hereby grant permission to \_\_\_\_\_ (name 1)

\_\_\_\_\_ (name 2)

\_\_\_\_\_ (name 3)

to open a water service utility account for the effective period date of

\_\_\_\_\_ (date)

**Owner Signature:**

State of \_\_\_\_\_

County of \_\_\_\_\_

The foregoing instrument was acknowledged before me this \_\_\_\_\_ day of \_\_\_\_\_, 20\_\_\_\_, by \_\_\_\_\_.  
He/she is personally known to me or has produced \_\_\_\_\_ as identification and did (did not) take an oath.

\_\_\_\_\_  
Notary Public

Notary Stamp: