

State of Utah Department of Workforce Services LANDLORD STATEMENT

HEAT Agency:	_
Case #:	_

This form must be completed and signed by landlord (property owner) or the residence manager of applicant. Please note, to be eligible for HEAT assistance, clients whose rent is subsidized must pay energy costs directly to an energy supplier.

Date:	Tenant nar	ne:				
Tenant address:						
Number of occupants resi	ding in rental unit:					
Are you related to the tena	ant?				Yes	No
Do the tenant and landlord	d reside at the same	e address?			Yes	No
This rental unit is a (check one):	House Mobile Home	Apartment Small Trailer	Duplex Condo/town		nent Apart	ment
Primary heat source is (check one):	Gas Wood	Electricity Propane	Steam Fuel Oil	Coal		
Do the tenant and landlord	d share a living area	a or entrance?			Yes	No
If Yes, which area(s)?	Entrance Bathroom	Living Room Garage	Bedroom Kitchen			
Monthly rent due from ten	ant: <u></u> \$	Is the rent sub	sidized?		Yes	No
Does tenant work in excha	ange for part of the	rent?			Yes	No
If yes, how much? \$						
Which energy costs are included in rent?			Electricity	Gas/Propane/Other		
Which energy costs are paclient? (Recent utility bills in Do the landlord and tenan	must be provided).		Electricity No	Gas	s/Propane/	'Other
If yes, which costs?			Electricity	Gas/Propane/Other		
Please print and sign yo and attach a business ca		clude a phone nu	ımber where y	ou may	be reach	ed
Name (print):						
Phone:		Position/title:				
Legal Name of Landlord ((Property Owner):_					
Landlord's address:						
Signature:			Date:			