

**THIRD PARTY NOTIFICATION REQUEST
CITY OF LACEY**

I am the owner/property manager of the property(ies) listed below:

Please send a copy of any delinquent notices to the following:

Name: _____

Address: _____

City/St/Zip: _____

Phone number: _____

Property Owner/Manager: _____

I agree to notify the City of Lacey if my address or phone number or email changes. If renters get locked off for non-payment, or duplicate notices are returned as undeliverable, I will be removed from receiving duplicate notices.

I also want copies of every bill: **YES** **NO**

Signature Date

Print Name

Please Return to:

By Mail or In Person
Lacey Utility Billing Dept.
420 College St SE,
Lacey WA 98503

By Email
UtilityBilling@ci.lacey.wa.us

By FAX (please verify receipt)
(360) 438-2669

City of Lacey Use Only:	
Received On: _____ Date	By: _____ Initials