

UTILITY INTERRUPTION NOTICE



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	DATE PROPERTY NAME / NUMBER		
	RESIDENT NAME(S)		
	TEODERI TVAIVE(O)		
	UNIT NUMBER STREET ADDRESS		
	CITYSTATEZIP		
SAMPLI	E SAMPLE		
	This is to notify you of a utility interruption that may affect this building and/or your unit during the following times (all of which are approximate):		
	Starting SAMPLE at SAMPLE and completed by SAMPLE at SAMPLE TIME (am/pm)		
SAMPLI	Ę.		
	Utilities affected:		
	Reason for interruption:		
	SAMPLE		
	Actual notice of the utility interruption has been given to Resident as follows: SAMPLE Verbally to Resident at SAMPLE TIME (am / pm) On DATE Or		
	Left message on Resident's answering machine at SAMPLE on SAMPLE or		
	Notice posted on door of unit at SAMPLE on SAMPLE or DATE		
	Notice mailed to Resident by first class mail on SAMPLE (add 3 days for mailing only) or		
	Notice given by other method allowed by written rental agreement at SAMPLE on SAMPLE.		
Identify method: SAMPLE			
	We appreciate your understanding and cooperation.		
	SAMPLE		
	SAMPLE OWNER/AGENT XSAMPLE	SAMPLE	
	ADDRESS SAMPLE		
	SAMPLE		
	TELEPHONE		
	EMAIL		