VERIFICATION OF ELECTRICAL/SECURITY LIGHT SERVICE

This is to confirm that	
	(Tenant Name)
will start electric/outside secu	rity light service in his/her name as of
(Se	rvice Date)
at	
(Ren	ntal Address)
Tenant Signature	Utility Person Signature

1001 Prince Avenue Athens, Georgia 30603-1312 1-888-660-5890