

I give permission to **Flathead Electric Co-Op** to send a duplicate copy of any “**Disconnect Notice**” to the Landlord.

Address of Apartment is: **706 Waverly Place, Whitefish, MT 59937**

Apartment number: _____

Tenant Signature: _____

Tenant Name Printed: _____

Last 4 digits of Social Security Number: _____

Date: _____

Copy of Disconnect Notice can be sent to the Landlord at:

Cathryn Lai
2755 US HWY 93 W
Whitefish, MT 59937

Phone: 406-862-5457

A copy of this form will be faxed to Flathead Electric at: **406-756-3029**