



Serving elderly, disabled & low income citizens of  
Bristol and Sullivan County, Tennessee  
204 Bluff City Hwy. • Bristol, TN 37620-4215

## **UTILITY REIMBURSEMENT FORM**

YOUR UTILITY REIMBURSEMENT CHECK WILL BE ISSUED DIRECTLY TO **ONE** UTILITY COMPANY. A UTILITY REIMBURSEMENT CHECK WILL NOT BE PROCESSED WITHOUT THIS FORM. ADDITIONALLY, WE CANNOT ENTER INTO A HAP CONTRACT WITH YOUR LANDLORD WITHOUT THIS COMPLETED FORM ON FILE. COMPLETE THE INFORMATION BELOW AND RETURN TO OUR OFFICE PRIOR TO SIGNING YOUR LEASE AGREEMENT.

UTILITY COMPANY NAME: \_\_\_\_\_

UTILITY ACCOUNT #: \_\_\_\_\_

NAME ON ACCOUNT: \_\_\_\_\_

TENANT'S NAME: \_\_\_\_\_

UNIT ADDRESS: \_\_\_\_\_

CITY, STATE AND ZIP: \_\_\_\_\_

### **\*\*\*\*\*AUTHORIZATION\*\*\*\*\***

I/We hereby authorize Bristol Housing to initiate debit entries to the account listed above and obtain any information or documents to verify such data as may be deemed necessary for my participation in the Section 8 Housing Choice Voucher Program.

\_\_\_\_\_  
Signature of Head of Household

\_\_\_\_\_  
Date

\_\_\_\_\_  
Signature of Spouse or Co-Head

\_\_\_\_\_  
Date

\_\_\_\_\_  
Signature of Account Holder *(If different from above)*

\_\_\_\_\_  
Date