



**UTILITY RESPONSIBILITY FORM**

Participant name: \_\_\_\_\_

Name on bill: \_\_\_\_\_

Address on bill: \_\_\_\_\_

\_\_\_\_\_

Utility company: \_\_\_\_\_

Account number: \_\_\_\_\_

Reason utilities are not in name of "Participant" above:

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**The individual whose name appears on the bill must read the certification below and sign:**

I certify that the information above is accurate, that I do not reside at the address on the bill as listed above, that the individual listed above as "Participant" resides at the address show on the bill, and that the individual listed as "Participant" is responsible for paying the bill.

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Phone #