

**Landlord Lien Exemption Form**

Landlord Name: \_\_\_\_\_

Rental Address: \_\_\_\_\_

City: \_\_\_\_\_

State: \_\_\_\_\_

Zip Code: \_\_\_\_\_

Tenant Name: \_\_\_\_\_

Phone Number: \_\_\_\_\_

Last 4 of Social Security Number: \_\_\_\_ \_

Date of lien exemption to begin on: \_\_\_\_ / \_\_\_\_ / \_\_\_\_

*Your signature below represents that you are the landlord or tenant of the rental property identified above and that such property is occupied or is about to be occupied by the tenant(s) identified above and the tenant(s) is liable for the rates or charges. Furthermore, you represent that the tenant(s) is not a contract buyer. You (the landlord) are requesting an exemption on the residential property from the possibility of a lien for water, sewer, and garbage services in accordance with section 384.84, Code of Iowa.*

Landlord Signature:

Tenant Signature:

\_\_\_\_\_

\_\_\_\_\_

\*\* Landlord requests that notice of delinquency/discontinuance of service be sent to both tenant and property owner: \_\_\_\_\_ Yes \_\_\_\_\_ No

\*\* Landlord requests that notice shall be sent to them in the event of any change of name for service under the account: \_\_\_\_\_ Yes \_\_\_\_\_ No