Morristown-Hamblen Central Services, Inc. 2450 South Cumberland St. / P.O. Box 1622 Morristown, TN 37814 423-586-9431

Verification of Address Form

(for clients who do not have current utility account in their name)

Го:				
	(Utility Customer or	Landlord Name)		
		states t	hat he/she i	resides at
	(Applicant Name)			
	(Applicant a	ddress)		
	the utility account is in your name, we musess and (check the appropriate statement):	t ask you to verify	that this cli	ent lives at this
1.	Is completely responsible for payment of u	tility costs.		
2.	Is partially responsible for payment of utili	ty costs.	,	
3.	Is not responsible for any payment of utilit	y cost.		
same	e Note: Central Services (unlike DHS) define address as the utility bill. Giving the above result in denial of some services to you.			_
Signat	ure of Utility Customer or Landlord		Da	te
Addre	ss City		State	Zip Code

A United Way Agency