

DATE FILED:
CLERK:
NOTES:

WATER AFFIDAVIT

TO: FLINT CITY COUNCIL

This affidavit is filed pursuant to chapter 46 of the Flint City Code, 1939 PA 178 and 198, PA 132, (MSA 5.2531 et. Seq.) and 133 PA (MSA 5.2751) to notify council of a tenants responsibility for the payment of charges for water and sewage disposal services, and to prevent delinquent charges for said services from becoming a lien upon said premises.

STATE OF MICHIGAN))ss.

COUNTY OF GENESEE) _____, first being duly sworn, deposes and says:

1. ☐ That he/she is the property owner of record of the premises located at: _____, Flint, Michigan

☐ That he/she is the agent for _____, who is the property owner of record for the premises located at: _____, Flint, Michigan
2. That the premises are leased to _____, who has/have agreed in a legally executed lease to be responsible for the payment of water and sewer system bills accruing subsequent to the to the filing of this affidavit.
3. The lease ☐ does ☐ does not have an expiration date of _____. **LESSOR SHALL PROVIDE WRITTEN NOTICE TO THE CITY OF ANY CANCELLATION, CHANGE IN, OR TERMINATION OF THE LEASE WITHIN TWENTY (20) DAYS.**
Filing a subsequent affidavit and lease within the 20 day period shall be sufficient notice.
Failure by the lessor to notify this office in writing will result in termination of this affidavit.
4. This property is currently occupied: ☐ YES ☐ NO
This property has a current Certificate of Compliance: ☐ YES ☐ NO
Permanent Parcel Number: _____
Current Certificate Number: _____ Expires: _____

THIS AFFIDAVIT WILL NOT BE ACCEPTED WITHOUT A COPY OF THE SIGNED LEASE OR RENTAL AGREEMENT ATTACHED AND MUST HAVE BEEN NOTARIZED WITHIN THE PAST 30 DAYS.

SIGNATURE OF OWNER/AGENT (COPY OF PAPERS ATTACHED) _____

ADDRESS OF OWNER/AGENT – PROPER RETURN ADDRESS _____

CITY, STATE, ZIP: _____ **PHONE NUMBER** _____

SUBSCRIBED AND SWORN TO BEFORE ME THIS _____ DAY OF _____ 20____ A.D.

NOTARY PUBLIC, GENESEE COUNTY, MI. MY COMMISSION EXPIRES:

I REQUEST THAT THE WATER AND SEWER SERVICE BE PLACED IN MY NAME AT THE ABOVE LISTED ADDRESS:

I DECLARE UNDER PENALTY OF PERJURY THAT THE INFORMATION ON THIS FORM IS TRUE AND COMPLETE, AND ALL SIGNATURES ARE AUTHENTIC.

tenant name(s) Drivers License / Michigan I.D. _____

TENANT SOCIAL SECURITY NUMBER _____ EXPIRATION DATE ON I.D. _____

AUTHORIZING SIGNATURE: _____ DATE OF BIRTH ____/____/____ PHONE _____

(Please note: Affidavit must be delivered in person and will not be accepted via mail. All applicable fees due upon submission of this affidavit. Altered copies of this affidavit will not be accepted. A Certificate of Compliance is not required to transfer water service, but noncompliance may result in other fines or fees. Section 4 questions above are not mandatory for submission.)

Revised 07/08/2025

Landlord - Tenant Agreement (Lease)

LANDLORD(S): _____

ADDRESS: _____, MI 48 _____

ALL TENANTS NAMES AT THIS LOCATION:

Address of Property Rented: _____, MI 48 _____

RENTAL PERIOD

_____ MONTHLY _____ BI WEEKLY _____ WEEKLY

OTHER _____

RENT: \$ _____

RENT IS DUE ON THE _____ **DAY OF THE RENTAL PERIOD**

TENANT **IS** responsible for all charges for water and sewer service while renting this property.

TENANT **WILL** put water and sewer bills in its name.

NOTICE: MICHIGAN LAW ESTABLISHES RIGHTS AND OBLIGATIONS FOR PARTIES TO RENTAL AGREEMENTS. THIS AGREEMENT IS REQUIRED TO COMPLY WITH THE TRUTH IN RENTING ACT. IF YOU HAVE A QUESTION ABOUT THE INTERPRETATION OR LEGALITY OF A PROVISION OF THIS AGREEMENT, YOU MAY WANT TO SEEK ASSISTANCE FROM A LAWYER OR OTHER QUALIFIED PERSON.

LANDLORD'S SIGNATURE:

TENANT'S SIGNATURE:

SIGNED _____, 20____

SIGNED _____, 20____