



City of Boulder

City of Boulder Utility Billing
1777 Broadway
Boulder CO 80302
303-441-3260
Fax 303-441-4089

Tenant Moving In Form

Information From: _____

Property Address: _____

Tenant First Name: _____

Tenant Last Name: _____

Move In Date: - - _____

Phone Number: _____

Mailing Address (if different from Property Address):

Landlord/Property Manager: _____

Landlord's/Property Manager's Phone Number: _____

Landlord's/Property Manager's Address:

For Utility Billing Staff Use Only

Previous Tenant/Owner: Ebills: _____ Payment Plan: _____

Send Owner/Property Mgr letters: _____

Previous Tenant/Owner: Customer Number: _____ Account Number: _____

Previous Tenant/Owner Balance \$ _____

Special Note: _____

Final Service Order #: _____

UTB Initials: _____