



## **LIEN LETTER REQUEST FORM**

**Date of Request:** \_\_\_\_\_

**Party Making Request:**

Name: \_\_\_\_\_  
Company: \_\_\_\_\_  
Address: \_\_\_\_\_  
\_\_\_\_\_  
Phone: \_\_\_\_\_ Fax: \_\_\_\_\_  
E-mail: \_\_\_\_\_

**Account Information:**

Customer Name(s): \_\_\_\_\_  
Address: \_\_\_\_\_  
\_\_\_\_\_  
Account number: \_\_\_\_\_  
Tax ID number: \_\_\_\_\_  
Information being Requested: \_\_\_\_\_  
Reason for Request: \_\_\_\_\_  
Anticipated Closing Date: \_\_\_\_\_

- A fee of **\$20** payable to Highland Sewer & Water Authority must accompany this form.
- Only one account request per form.
- Please select one of the following form return methods:

E-mail: \_\_\_\_\_

Fax: \_\_\_\_\_

Mail (Please included a stamped, self-addressed envelope for this option)

***If the information is for an account that is active, be advised charges are continuing to accrue. This amount will most likely not be valid at closing. It is imperative you request an updated amount the day prior to closing.***

***The account holder must request a final read prior to transfer.***

**PLEASE RETURN THIS FORM WITH PAYMENT.**