Leave On For Landlord - Removal



Per your request to be removed from the **Leave On For Landlord** program, please complete the enclosed deletion form and return it by email, fax or mail:

SAVE TIME BY emailing: LOFL@nationalgrid.com

Fax: (315) 460-9752

National Grid 300 Erie Blvd West Syracuse, NY 13202

Attn: Account Maintenance & Operations

If additional lines are needed, use the back of the form or attach a separate sheet. Please sign and date the form before returning it to us.

If you have any questions about this program or the **Leave On for Landlord** deletion form, please contact Customer Service at 1-800-930-5003 or use the Contact Us link on the National Grid website.

Thank you for your interest in our **Leave On for Landlord** program.

Please do not respond to this email, as it was sent from an automated system that is not monitored.







Landlord Deletion Form

nationalgrid

To remove accounts from this program, complete this form and submit. These accounts will no longer be transferred to your name when your tenant stops service. Simply complete and return this form to:

Long Island Customer:

National Grid 300 Erie Blvd. Syracuse, NY 13202

Fax: (315) 460-9752

Email: I OEI @nationalgrid.com

Email. Lor Lemationaigno	.COITI					
Landlord/Owner Name						
Contact Telephone						
Mailing Address			City		State	Zip Code
Withdrawal of Account:						<u>'</u>
Account Number (if available)	National Grid's Meter Number		House Number	Street Name	Bldg/Fl/ Apt	City/Town
	Electric	Gas				
Terms and Conditions						

I request that National Grid discontinue and immediately turn off electric/gas service in the name shown above whenever a tenant of one of the locations listed requests that service be disconnected in their name.

I understand that National Grid is not required to contact me when tenants request to disconnect service.

Please Note: If you have listed a meter that is currently on in your name, we will have power disconnected and service will be taken out of your name once we have processed this application.

I agree that I will not make any claim for damages on the grounds that I did not authorize service to be taken out of my name. Please sign this application if you have read and accepted the Terms and Conditions above.

Date	Authorized Signature				
	T''.				
	Title (Landlord, Owner, Manager)				