

**CABLEVISION\ SATELLITE\ FIBER-OPTICS, ETC. PERMISSION  
LANDLORDS OF IOWA, INC.**

**TENANT:**

\_\_\_\_\_

**ADDRESS:**

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**HAS PERMISSION FOR INSTALLATION OF CABLEVISION\ SATELLITE\ FIBER-OPTICS, ETC. FROM OWNER/MANAGER**

**PLEASE NOTE THE FOLLOWING INSTRUCTIONS [if any]:**

\_\_\_\_\_  
\_\_\_\_\_

**OWNER/MANAGER/AGENT:**

\_\_\_\_\_ **PHONE NUMBER:** \_\_\_\_\_

\_\_\_\_\_  
**[SIGNATURE OF OWNER/MANAGER/AGENT]**

\_\_\_\_\_  
**[DATE]**