

RENTERS OCCUPANCY FORM

THE RENTER WILL NOT RECEIVE A WATER BILL IF THIS FORM IS NOT COMPLETED AND RETURNED.

Please be advised that a new form must be completed for a new renter, otherwise a bill will only be sent to you, the owner. Additional forms are available at the District Office.

OWNER INFORMATION

Date _____ Account Number _____ Rt & Seq _____

Owners Name _____ Phone _____

Owners Address _____

City _____ State _____ Zip _____

RENTAL INFORMATION

Date Rented _____ Acct Number _____

Name _____ Phone _____

Rental Address _____

City _____ State _____ Zip _____

Collection action will begin on any balance that is over 60 days past due.

As an Owner of the Property mentioned above, I request that my renter receive the monthly bill.

I understand that should the renter default, I as the owner am responsible for any charges incurred by my renter. Including any costs or charges for collections.

I have read the enclosed Policy # 1140 / Water Services Regulations and agree to abide by them.

Manager / **OWNERS SIGNATURE** _____ **DATE** _____