



CITY OF MARSING SEWER & WATER UTILITY BILLING DIRECTIVE/TENANT'S FORM

ACCOUNT# _____

RENTER'S MOVE-IN DATE: _____

The undersigned, being the property owner/property manager of the above described property and account, do hereby instruct City of Marsing Sewer & Water to send the monthly billing statement for water and sewer to above referenced address in care of the following renter names:

_____ Phone# _____ (tenants)

I understand that billing for services will remain in the above referenced "Property Owner" name and sent in care of the person named herein at my request. I will notify City of Marsing Sewer & Water of any vacancy.

Owner Initials _____

I do hereby acknowledge that I have been advised, I agree, that I will remain responsible for unpaid account balances for water and sewer services. Owners Initials _____

I acknowledge that I will receive monthly statements for this account. If the account becomes delinquent, I will be sent a copy of each delinquency notice that is sent to the tenant. I further agree that any and all amounts due for water and sewer services shall constitute a lien on the real property which will secure the amounts due. Termination of services to the property will not release any lien for amounts due. Owner Initials _____

By signing this form, I permit The City of Marsing Sewer & Water to release any information requested about this account to the afore mentioned tenant. The information released may be, but is not limited to; the account balance, payment history, or delinquency status.

Owner Initials _____

This request shall remain valid until the property owner or authorized agent notifies City of Marsing Sewer & Water and/or a new directive is provided and filed with the City of Marsing Sewer & Water. The new tenant's name will not be added until the balance prior to the date of this form is received by The City of Marsing Sewer & Water. Owner Initials _____

Do you authorize your tenant to pay the monthly amount directly to the City of Marsing?

- YES _____ NO _____

Do you allow your tenant to make arrangements with the City to make partial payments?

- YES _____ NO _____

I do hereby certify that I am the owner or the duly authorized agent to make this request for the owner of the subject property receiving the service. By signing below, I further acknowledge that I have read, understand, and agree to the terms and conditions set forth above.

I, _____ (Owner/Property Manager), attest that _____ (Tenant) is renting the following property address _____, starting on _____ (Date).

Signed: _____ Dated: _____

- Owner _____ Property Manager _____

Printed Name: _____ Phone# _____

Address: _____ City, State, and Zip: _____