

## ALTERNATE BILLING AGREEMENT FOR RENTAL ACCOUNTS

### **Owner's information**

NAME: \_\_\_\_\_ LOCATION#: \_\_\_\_\_

ADDRESS: \_\_\_\_\_ HOME PHONE# \_\_\_\_\_

EMAIL ADDRESS: \_\_\_\_\_ CELL PHONE# \_\_\_\_\_

### **Renter's Information**

I hereby authorize Springs Hill Special Utility District ( S U D ) to send all billings on my account to the person(s) and address below until further written notice:

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

I understand that under this agreement I will be given notice by the SUD of all delinquencies on this account prior to disconnection of service.

I understand that if I request that my security deposit be canceled at this location, thereby discontinuing service to an occupied rental property, that the SUD Will provide the above listed person with written notice of disconnection five (5) days prior to the scheduled disconnection date.

I also understand that I am responsible to see that this account balance is kept current, as is any other account in the SUD. This account shall not be reinstated until all debt on the account has been retired.

Signature \_\_\_\_\_

Date. \_\_\_\_\_

Would you like to have your renter pa) \$150.00 deposit?

(Initial)

\_\_\_\_\_  
Yes

No