

**BECKER-JIBA SPECIAL UTILITY DISTRICT
ALTERNATE BILLING AGREEMENT FOR RENTAL ACCOUNTS**

MEMBER

NAME: _____

METER #: _____

ADDRESS: _____

ACCT #: _____

CITY, STATE, ZIP CODE _____

TELEPHONE NUMBER (____) _____

I hereby authorize Becker-Jiba Special Utility District to send all billings on my account to the person(s) and address below until further written notice:

Name _____

Address _____

City, State, Zip _____

Telephone Number (____) _____

I understand that under this agreement that I will be given notice by the District of all delinquencies on this account prior to disconnection of service, If I so request in writing that a notification \$5.00 fee shall be charged to the account in accordance with the provisions of the District.

I also understand that I am responsible to see that the account is kept current, that I must pay any account balance left by the renter. If the account is discontinued it shall not be reinstated until all debt on the account has been retired.

I also understand I am responsible for notifying the District of billing address changes when the above renter vacates the premises.

I also understand that all changes to the account must be by a written signed request from the account Member /Owner.

Members

Signature _____

Date _____

Members Name

Printed _____