

**SAND FLAT WATER SUPPLY CORP.
ALTERNATE BILLING AGREEMENT FOR RENTAL ACCOUNTS**

OWNER NAME: _____ ACCT #: _____

OWNER ADDRESS: _____

EFFECTIVE DATE: _____

I hereby authorize Sand Flat Water Supply Corp. to send all billings on my account to the person(s) and address below until further written notice:

Name: _____

Mailing Address: _____

Phone #: _____

I understand that under this agreement that I will be given notice by the Corporation of all delinquencies on this account prior to disconnection of service. A notification fee shall be charged to the account in accordance with the provisions of the Corporation's Tariff.

I understand that if I request that my membership be cancelled at this location, thereby discontinuing service to an occupied rental property, that the Corporation 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 for any balance left on this account by a tenant and that it must be paid in full before a new agreement can be accepted for another tenant.

Signature _____

Date _____