

ALTERNATE BILLING AGREEMENT FOR RENTAL ACCOUNTS

OWNER NAME: _____ METER#: _____

SERVICE ADDRESS: _____ ACCT#: _____

CITY: _____ ST: _____ ZIP CODE: _____ PHONE #: _____

OWNERS MAILING ADDRESS: _____

CITY: _____ ST: _____ ZIP CODE: _____

I hereby authorize Sardis-Lone Elm Water Supply Corporation to send all billings on my account to the person(s) and address below until further written notice:

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 the accordance with the provisions of the Corporation's SOP.

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

Signature _____ Date _____