CORNERSVILLE WSC

ALTERNATE BILLING AGREEMENT FOR RENTAL ACCOUNTS

OWNER NAME :	ACCOUNT # :
SERVICE ADDRESS :	METER # :
HOME PHONE # :	_
WORK PHONE # :	_
I hereby authorize Cornersville Water Supply Corporation to s the person(s) and address below until further written notice :	,
NAME OF RENTER :	
BILLING ADDRESS :	_
HOME PHONE # :	_
WORK PHONE # :	-
I understand that under this agreement that I will be given not delinquencies on this account prior to disconnection of service charged to the account in accordance with the provisions of the second service of the second	e. A notification fee shall be
I understand that if I request that my membership be cancelled discontinuing service to an occupied rental property, that the above listed person with written notice of disconnection five disconnection date.	Corporation will provide the
I also understand that I am responsible to see that this account other account in the Corporation. This account shall not be reaccount has been retired.	
Signature of Owner :	Date :