AUTHORITY TO BILL TENANT
For Water/Sewer Service

SERVICE LOCATION: _____ **(Westminster, MD)**

RENTAL HOUSING LICENSE #:
_____--_____

All <u>residential</u> rental properties must have a Rental Housing License in force at all times. If not yet registered or License is expired, please contact 410-848-9000 before submitting form.

HUD / SECTION 8 FUNDS
RECIPIENT: *(check one)*
☐ **YES**   ☐ **NO**

PROPERTY OWNER NAME: _____

OWNER MAILING ADDRESS: _____

_____

_____

OWNER PHONE #: _____

☐ The City of Westminster is hereby authorized to mail a **COPY** of the bill for water and/or sewer services to:

Name of Tenant(s): _____

Mailing Address of Tenant (if different than Service Location): _____

_____

Tenant Phone #: _____

Effective Date: _____
Must be submitted within 5 business days of the tenant change. Requests <u>cannot</u> be back-dated.

☐ I choose to have all bills sent **ONLY** to me at the above Owner Mailing Address.

It is understood and agreed that giving the City of Westminster authority to bill tenants directly does not relieve the undersigned Property Owner from primary liability for water consumed and/or sewerage discharged from the premises at the above address. **In accordance with Section 160.5.A of the City Code of Westminster, this form must be completed and returned to us before any account will be placed in the tenant's name**. Any accounts with an open final bill will become the landlord/property owner's responsibility until these charges have been paid. It is also the landlord's responsibility to periodically check on the status of their accounts and to notify the City when tenants move in/out in order that closing bills can be generated. **Landlords will always receive copies of all bills**.

Dated this _____ day of _____, 20 ____.

_____
Signature of Property Owner

Mail to: City of Westminster, 56 West Main Street, Westminster, MD 21157 OR Fax to 410-848-5345 – **Do not write below this point**

Account #: _____ Customer #: _____