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South Tawakoni Water Supply Corporation

410 W North Commerce Street
Wills Point, Texas 75169-2506

ALTERNATE BILLING AGREEMENT FOR RENTAL ACCOUNTS

NAME: _____ METER #: _____

ADDRESS: _____ ACCT #: _____

Email: _____

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

_____ PHONE# _____

_____ CELL # _____

_____ Email _____

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.

I understand that if I request that my membership be canceled 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 as the property owner and member of South Tawakoni Water Supply Corporation, I am responsible to ensure that this account balance is kept current, in accordance with the Corporation's Tariff Section E 10 e and E 18. If service has been disconnected, this account shall not be reinstated until all debt on the account has been paid in full.

Effective Date _____

Signature _____

Date _____