



AUTHORIZATION AGREEMENT TO BILL TENANT FOR MUNICIPAL WATER SERVICES

Water Account Number: _____

Service Address: _____ **Unit :** _____

I, (We) _____

(Print Name of Owner (s))

of _____

(mailing address)

_____ **declare as follows that:**

(City) (Province) (Postal Code)

1. I (We) are the Owners(s) of the property at the above noted **Service Address**.
2. I (We) rent the property to a tenant.
3. I (We) request that the Town of Erin bill the tenant noted below directly at the service address for all water rates and other charges attributable to the above property, including interest.
4. I (We) understand that despite not having received bills and notices in respect of the water service, if the Tenant defaults in payment, all rates and charges shall be recoverable against me (us) as a debt owed to the Town of Erin, or by any legal remedy afforded by statute.
5. All rates and charges shall be a lien on my (our) interest in the property pursuant to the Municipal Act, 2001, S.O. c 25, s. 398 (2) and By-Law 02-96 as amended.
6. I (We) acknowledge that the Town of Erin is not precluded from pursuing its legal remedies against the Tenant.
7. I (We) undertake to inform the Town of Erin of **all** Tenant(s), Occupants(s) and/or Owners(s) changes (including address) and accept responsibility for providing the initial meter reading for the new tenants(s).
8. This agreement is non-transferable and must be renewed for any and **all** Ownership and/or Tenancy changes.
9. I (We) specifically acknowledge and agree to the Town of Erin's right to revoke this agreement for any reason and to revert the account to me (us) as registered owners(s) for payment of all services and any outstanding balance.
10. I (We) appoint the person(s) to whom the bills and notices are directed as my (our) representative(s) for the purposes of granting the Town access to the property in relation to the Town's provision of water services and related activities including but not limited to inspections, at or to the property, even if these activities result in charges on the property.

<p>Owners('s) Signature</p> <p>_____</p> <p>Owners('s) Telephone</p> <p>Work () _____</p> <p>Home () _____</p> <p>Cell () _____</p> <p>Date: _____</p>	<p>Print Tenant Names</p> <p>_____</p> <p>Tenant('s) Telephone</p> <p>Work () _____</p> <p>Home () _____</p> <p>Cell () _____</p> <p>Occupancy Date: _____</p> <p>Initial Meter Reading _____</p>
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The personal information on this form will be used for the purposes of administration of the municipal water services. Questions regarding this may be addressed to: Town of Erin Water Department, 5684 Trafalgar Road, Hillsburgh, ON N0B 1Z0 (519)855-4407 extension 271.