CITY OF WEST SACRAMENTO

Authorization for Tenant Billing

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Section 1 - Purpose

The City of West Sacramento holds the property owner responsible for bringing to the property basic health-related services such as water, sewer, and refuse collection. Per Municipal Code 13.04.670, we bill the property owner directly for all services provided to the owner's property. We will, however, send the bill and related notices in care of a long-term tenant if agreed to by both property owner and tenant.
This form allows the tenant to receive the billing and request account changes to the following services which may result in increased billing charges:

Check which service to change billing address for ( ) *All services* ( ) *Commercial Refuse only*

Date change is effective. _____ (no pro-ration)
(Effective date is the NEXT calendar month when date above is not the 1st of the month.)

Section 2 – Information

Account Number: _____

Service Address: _____

Owner's Name: _____

Owner's Email Address: _____

Owner's Mailing Address: _____

_____

Owner's Daytime Telephone Number: (_____) _____

Tenant's Name: _____

Tenant's Mailing Address: _____

_____

Tenant's Daytime Telephone number: (_____) _____

Tenant's Email Address:_____

Section 3 - Authorization

As owner of the above service address, I understand that bills and related notices will be sent to the tenant and ***in the event these charges are not paid*** ***I will be held responsible*** and those unpaid charges can be placed as a lien against my property. Furthermore, I understand that it is my responsibility as owner of the property to periodically check on the status of this account and that ***no copy of the tenant billing will be*** ***sent to me*** by the city. The city reserves the right to cancel this agreement if the tenant fails to make payments which result in a delinquent notice.

_____ _____
Property Owner's Signature Date

_____ _____
Tenant's Signature Date