



Department of Public Works

Special Districts – Water and Sanitation Division

OWNER – AGREEMENT

(Pursuant to Section 4.6.11 of Rules and Regulations)

Owner, please complete the following information:

Tenant Move-In Date		Account Number	
Name of Tenant(s) (Authorized to receive bills)			
Legal Property Owner(s)			
Property Address			
Owner Mailing Address			
Home Phone		Cell Phone	
Driver's License/ID Number(s)		Email Address	
Please provide a copy of your Photo ID or this form must be notarized.			
Send Memo Bill to: <input type="checkbox"/> Property Management Company <input type="checkbox"/> Owner		Property Management Agreement? <input type="checkbox"/> Yes <input type="checkbox"/> No (If Yes, complete information below and provide copy)	
Mailing Address			
Phone Number		Email Address	
Go paperless to receive bills instantly by email, please select one box only. <input type="checkbox"/> Email <input type="checkbox"/> Mail			

AGREEMENT: This agreement authorizes the Division to send the bill to the above-named Tenant. The owner shall receive copies of all bills and delinquent notices mailed to the tenant including the final closing bill, which is calculated and mailed within 15 days of tenant giving notice of vacating premises. Failure to receive a bill does not relieve Owner of liability.

Previous tenant account balance **must** be paid in full prior to transferring into new tenant's name. Any amount due shall be deemed a debt to the Division and may be subject to disconnection, a lien against the property, or legal action at the option of the Division.

THIS AGREEMENT DOES NOT RELIEVE THE OWNER OF RESPONSIBILITY OF UNPAID BILLS ON THE PROPERTY.

Owner acknowledges tenant can have up to two payment extensions and is authorized to sign a Notice of Reconnect, if water has been disconnected for non-payment. This Agreement may be executed in multiple counterparts, each of which, when solely executed, shall be deemed an original, but all of which counterparts together shall constitute one and the same instrument. This Agreement shall become effective on the date each of said originals has been signed by each of the Parties hereto and each Party has received by facsimile or electronic transmission of the signature page from the other Party.

Please send signed Owner/Tenant Agreements and all photo identification copies to one of the following:

- customerservice@sdd.sbcounty.gov
- PO BOX 11969 San Bernardino, CA 92415
- Fax: (909) 386-8839

Legal Owner Printed Name

Signature

Date

Acting Agent Printed Name

Signature

Date