



**Town of Alpine
Water/Sewer Department
Renter Account Transfer Form**

I/We, the owner(s) of the property, request to make a transfer of the following water/sewer department account mailing address from my address into my renter's name/address.

Name of Owner: _____

Name of Renter: _____

Renter's Mailing Address: _____

Renter's Home Telephone #: _____

Renter's Work Telephone #: _____

Lot #: _____ **Subdivision:** _____

Physical Address: _____

Account Number: _____

By signing below, I understand and agree to the following: I understand as the owner(s) I/we are responsible for the utility bill if for any reason my renter does not pay. I understand I will receive a delinquent notice and shut off notice as outlined in 200 Ordinance 2010-02. I agree to follow all rules and regulations of the municipality pertaining to the use of such water and, if applicable, sewer services. I agree to explain these rules to the renters. **Billing Procedures-** Bills will be computed and mailed to renters no later than the fifth (5th) day of the month. Payment will be due on the fifteenth (15th) day of the month. Payments received after the twenty-fifth (25th) day of the month will be assessed a \$5.00 late charge. All billing is in arrears. For example, January's water/sewer usage is billed the beginning of February. Renter's and owner's will be advised of disconnect & shut off orders upon delinquent accounts. Please note a \$30.00 connection fee will be assessed on past due accounts that are shut-off. Reference: 200-Ordinance No. 2010-02

Owner's Signature: _____

Date: _____