

## Authorization for a renter to receive a copy of the Utility Bill

Owner's Name (please print): \_\_\_\_\_

Property Address: \_\_\_\_\_

Mailing Address: \_\_\_\_\_

Phone: \_\_\_\_\_ Alt. Phone: \_\_\_\_\_

Account #: \_\_\_\_\_

I/We hereby give authorization to the Town of Bon Accord to send a copy of the Utility Bill to:

Renter's Name (please print): \_\_\_\_\_

Mailing Address: \_\_\_\_\_

Phone: \_\_\_\_\_

**Please review and check each box:**

☐

I/We are acknowledging that the Town of Bon Accord sending a copy of the Utility Bill to the renter does not negate my/our responsibility for the outstanding balances on the account.

☐

I/We understand that if the Utility account is unpaid the outstanding balance may be transferred to the property taxes of the corresponding property in accordance with current Utility Bylaws.

*The information collected on this form is authorized under Section 33(c) of the Freedom of Information and Protection of Privacy Act (FOIP). It will be used to process utility bill authorization for the Town of Bon Accord. If you have any questions about the collection and use of the information, contact the Town of Bon Accord at 5025 - 50th Avenue, Bon Accord, AB, T0A 0K0 or by calling (780) 921-3550.*

\_\_\_\_\_  
Owner's Signature

\_\_\_\_\_  
Date

\_\_\_\_\_  
Owner's Signature

\_\_\_\_\_  
Date