

RENTER AUTHORIZATION FORM

Authorization for a renter to receive the Utility Bill

Owner's Name (please print): Property Address: Mailing Address:			
		Phone: Alt. Phone	e:
		Account #:	
Date Renter Authorization Begins:			
I/We hereby give authorization to the Town of Bon Accord to send 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 Acc renter does not negate my/our responsibility for t account.			
I/We understand that if the Utility account is unpotential transferred to the property taxes of the correspondence of the correspond			
The information collected on this form is authorized under Section Protection of Privacy Act (FOIP). It will be used to process utility bill a you have any questions about the collection and use of the information 50th Avenue, Bon Accord, AB, TOA OKO or by co	uthorization for the Town of Bon Accord. If on, contact the Town of Bon Accord at 5025 -		
Owner's Signature	Date		
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