

**Fruitvale Water Supply Corporation
PO BOX 75
Fruitvale, TX 75127
903-896-1224**

ALTERNATE BILLING AGREEMENT FOR RENTAL ACCOUNTS

NAME: _____

METER #: _____

ADDRESS: _____

ACCT #: _____

PHONE: _____

I hereby authorize Fruitvale Water Supply Corporation to send all billings on my account to the person(s) and address below until further written notice:

Address

Phone

I understand that under this agreement that I will be given notice by the Corporation of all delinquencies on this account prior to disconnection of service. A notification fee shall be charged to the account in accordance with the provisions of the Corporation's Tariff.

I understand that if I request that my membership be canceled at this location, thereby discontinuing service to an occupied rental property, that the Corporation will provide the above listed person with written notice of disconnection five (5) days prior to the scheduled disconnection date.

I understand that as the property owner and member of Fruitvale Water Supply Corporation, I am responsible to see that this account balance is kept current, in accordance with the Corporation's Tariff Section E.10.e and E.18. If service has been disconnected, this account shall not be reinstated until all debt on the account has been paid in full.

Signature _____

Date _____