



# Del Paso Manor Water District

## Authorized Account Representative Form

RE: \_\_\_\_\_ Account #: \_\_\_\_\_  
*Property Address*

I am the legal owner of the property and am currently renting my property at the above-mentioned address. I would like the District to send the water statement to the tenant &/or property management company. I am ultimately responsible for the water bill and any charges that my tenant/property management company may incur for non-payment and services requested

Sincerely,

\_\_\_\_\_  
Print Property Owner Name Property Owner Phone Number

\_\_\_\_\_  
Property Owner Email Address

\_\_\_\_\_  
Billing Name (*Tenant &/or Property Mgmt. Co.*) Billing Phone Number (*Tenant &/or Property Mgmt. Co.*)

\_\_\_\_\_  
Authorized Account Representative Name(s) Authorized Account Representative Phone Number

\_\_\_\_\_  
Billing Address (*Tenant &/or Prop. Mgmt. Co.*)

\_\_\_\_\_  
Owner Signature Date:

1817 Maryal Drive, Suite 300, Sacramento, CA 95864  
Phone: (916) 487-0419 [www.delpasomanorwd.org](http://www.delpasomanorwd.org)