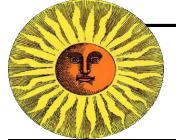
## Owner/Tenant Billing Application



Please return this completed application to Sundale Mutual Water Co Mailing Address: P.O. Box 6708, Lancaster, CA 93539-6708

Physical Address: 7337 West Ave A, Rosamond, CA 93560

Fax: (888) 786-8168 \* Phone: (661) 256-3100 \* E-Mail: <u>sundalemutual@gmail.com</u>

Date of Application: _		Effective Date:	
Service Address:			
	TENANT INFO	RMATION	
Please Print Clearly			
Tenant's Name:			
Mailing Address:			
Phone:		Cell:	
	OWNER INFO		
Please Print Clearly			
Property Owner's Name:			
Property Management Co	o. Name		
Agent Name:			
Mailing Address:			
Phone:	Work:	Cell:	
	reason, SMWC requires the	looks to the land owner who owns the ser e Owner to keep the account in their nam Owner/Tenant Agreement.	_
any additional fees that have befees, reconnect charges, Dis/R set forth in the Sundale's curre	oeen incurred, including, bu Re Install Meter Charge, Ina ent <i>Water Rates and Misce</i>	oner may be responsible for any past due at not limited to late-payment penalties, hotive Usage Charge, or any other charges allaneous Charges and Fees. Sundale also other collection opportunities.	hanging occurred as
I have r	ead and consent to the	terms of this agreement.	
Property Owner's Signatur	e	 Date	