Service Address (the "Property"):	Property Type: Residential Commercial/Multi-Family If Residential Rental: Short Term
Tenant/Alternate Billing Information	All fields, documentation, signature, and ID are required to process this agreement. Property Owner Mailing and Contact Information
Renton Business License No.	*Rental Registration No.
Name:	Owner's Name:
Mailing Address, City, State, Zip:	Owner's Home Address, City, State, Zip
Email: Daytime Phone No.	Email: Daytime Phone No.
*Under Renton Municipal Code, landlords are required to register all residential ren (https://www.rentonwa.gov/city_hall/equity_housing_and_human_services/housing_business license are also required for 3rd Party bill payer's and Property Management	g/rental_registration_program) A signed management agreement and a Renton
the transfer of billing requested herein will not take place until the tenant/alternate party are for my personal convenience only; it do provided to the Property, nor in any way affects lien rights against t Tenant/Alternate Billing Terms	
and retain the existing account number.	I. Utility billing accounts remain in the name of the legal Property owner balances are kept current. This authorization automatically terminates if nent ceases, or the tenant vacates the property.
assessed for each change. I further understand that if the to agreement will be allowed by the City of Renton. Outstanding	n and requires the Property owner to submit a new form; a \$5 fee will be enant/alternate party named, nor I, clear all unpaid charges, no similar g charges may become a lien against the real property served. ce due from a prior tenant/alternate party. A per diem is provided on the
Please Note: Active auto-payments will continue unless cancelled file with the city, and you wish to cancel the automatic withdrawals	d online at www.rentonwa.gov/ub . If there is a direct debit application of check this box: Remove Existing Direct Debit Information
On-Line payments and ebilling - If you prefer not to submit this for online account access at to view your account history, receive e-state.	form, provide your tenant with your account number and they can create tements and submit payments.
By signing this document, I certify that I have read, understa-	nd and agree to abide by the terms of this request for tenant billing.
Printed Name: Signature	
A legible copy of the owner's driver's license or state identification must be owner may have the form notarized below.	
SUBSCRIBED AND SWORN to me thisda	ay of

Notary's Signature

Print Notary's Name

My commission expires_

Notary Public in and for the State of ___

Print Form