

Application for Duplicate Billing

The undersigned, being the owner of the following described single-family residential property hereby requests that Valley View Sewer District, King County, send duplicate billing of sewer charges to the tenant of the said rental property, on terms and conditions set forth herein:

Account No:	<input type="text"/>		
Tenant Name(s)	<input type="text"/>		
Tenant Address	<input type="text"/>		
Tenant Address 2	<input type="text"/>		
City	<input type="text"/>	State	<input type="text"/>
Zip code	<input type="text"/>	Tenant Phone #	<input type="text"/>

Terms and conditions

1. Duplicate billing shall in no way be construed by either party as a waiver of District's rights to file a lien or liens against the real property pursuant to statutory authority of the State of Washington.
2. This duplicate billing shall not relieve the property owner or the property itself of liability for any and all unpaid sewer charges, interest and penalties. If the account is unpaid by the tenant this contract is null and void and the account will revert back to the owner of the property and commencement of lien and foreclosure will proceed if the account is not brought current.
3. In the event of a change of tenants, the owner must notify, in writing, the District within thirty (30) days.
4. Effective June 1, 2008, there is an administrative fee of \$25.00 for each tenant set up on the duplicate billing program.
5. **Account balance MUST be \$0 for this form to be processed.**

Date	<input type="text"/>	Owner's mailing address	<input type="text"/>		
Owner's signature	<input type="text"/>	City	<input type="text"/>		
Owner's printed names	<input type="text"/>	State	<input type="text"/>	Zip code	<input type="text"/>
		Phone Number	<input type="text"/>		

<i>For Office Use Only</i>	
Approved by	<input type="text"/>
Date	<input type="text"/>
Additional Information	<input type="text"/>

<input type="button" value="Reset Form"/>	<input type="button" value="Print Form"/>
---	---