OWNER'S REQUEST FOR MONTHLY SEWER CHARGES TO BE SENT DIRECTLY TO TENANT

	is one of the owners of real property an, East Wenatchee, Washington. Said rea	
are located within the service area	a of Douglas County Sewer District No. 1.	
landowners directly for monthly	recognizes that it is Douglas County Sewer Divisewer service charges even if the property servindersigned requests that Douglas County Sewer	ed is leased and/or rented or
Renters nar	me:	Customer #
Mailing Ac	ldress:	
City/State/	Zip:	
Phone #:		
Eman:		
that the tenant is paying the mont to collect the service charges again that are applicable to Douglas Co and for foreclosure of that lien up notice and/or copy of the lien to from the date that the notice and Sewer District No. 1 may initiate	es that Douglas County Sewer District No. 1 will not hely sewer service charges or to call and remind or in inst the tenant or the undersigned. The undersigned unty Sewer District No. 1 allow for the filing of a legon a continued failure to pay. Douglas County Sethe undersigned when it is filed and the undersigned for lien is mailed to bring the account current. After foreclosure or cap off proceedings and the undersigned county Sewer District No. 1's costs and attornations.	n any other manner take action d understands that state statues ien against the property served ewer District No. 1 will send a d will then have ten (10) days ter such time Douglas County rsigned recognizes that he/she
THE UNDERSIGNED understar owner(s) and by the execution of sewer services to the tenant at the	nds that the property may be liened without any the agreement requests that Douglas County Sewer above address.	further notice to the property District No. 1 send the bill for
	nds that upon termination of tenancy by the tenant count by the owner or tenant will be negotiated and	
THE UNDERSIGNED understan	ds that payments resulting in a credit account balan	nce less than \$5.00 will not be
	PROPERTY OWNER MANAGER	
Dated:	Signature:	Customer #
	Print Name:	
Effective Date of Occupancy:	Address:	
	City/State/Zip:	
	Phone #:	
	Property Owner	Customer #
	Address:	
	City/State/Zip:	
	Phone #:	

DCSD Office # 509-884-2484/Fax # 509-884-8091

Email: