



1510 228th Avenue SE, Sammamish, WA 98075
425.392.6256 • spwater.org

WATER AND/OR SEWER BILL MANAGEMENT AGREEMENT

OWNER INFORMATION

OWNER NAME _____ ACCOUNT NUMBER _____
PHONE NUMBER _____ EMAIL ADDRESS _____
MAILING ADDRESS _____

PROPERTY ADDRESS _____
TAX PARCEL NO. _____

PROPERTY MANAGEMENT INFORMATION

PROPERTY MANAGEMENT COMPANY NAME _____
PROPERTY MANAGER CONTACT NAME _____
PHONE NUMBER _____ EMAIL ADDRESS _____
MAILING ADDRESS _____

By signing this agreement I, _____
the lawful owner of the property listed above (the "Property"), authorize my Management
Company:

_____ to serve as my authorized agent as follows:

- I hereby authorize my Property Management Company to act on my behalf to initiate or stop service at the Property, in a tenant(s) name(s), and I agree to defend, indemnify and hold harmless the District for any claim(s) arising from this authorization and the actions of my Property Management Company, including but not limited to claim(s) brought by tenant(s).
- I hereby authorize my Property Management Company to act on my behalf to approve of any payment arrangements initiated by a tenant for service to the Property.
- I understand that I am responsible for any unpaid bills that a tenant, my Property Management Company, and/or myself fail to pay on for service to the Property, and I understand that water and sewer bills, if not timely paid, will result in a lien for the total cost (as well as applicable interest) against the Property,

- I understand that as the property owner I will be responsible for any lien-recording costs associated with this agreement, any legal fees necessary to file or enforce the lien, and any associated necessary recordings.
- I understand that it will be my responsibility to contact the Sammamish Plateau Water District to remove the Management Company from the account if they are no longer authorized to act as my agent.
- I agree to notify the Sammamish Plateau Water District if my contact information (including but not limited to personal mailing address and or phone number) changes.

This Agreement will remain in force until such time that I revoke it, in writing, with the District. A written revocation must be acknowledged, in writing, by the District before it is considered in effect.

I have carefully and completely read this agreement and fully understand the terms of it.

I am over the age of eighteen (18), authorized to execute this agreement and have voluntarily executed the agreement by action of my own free will.

I agree and acknowledge that 1) my application will not be signed in the sense of a traditional paper document, 2) by signing in this alternate manner, I authorize my electronic signature to be valid and binding upon me to the same force and effect as a handwritten signature, and 3) I may still be required to provide a traditional signature at a later date.

Date _____

Owner signature _____

Printed Name _____

FOR INTERNAL USE ONLY

Received by _____ Date _____

Landlord account created on _____ Date _____

Landlord account number _____ Number _____