



# Paradise Irrigation District

6332 Clark Rd, Paradise, CA 95969 · 530-877-4971 · Fax: 530-876-0483 · www.pidwater.com

## PROPERTY MANAGER AUTHORIZATION

### Account & Property Owner Information

Account Number: \_\_\_\_\_

Service Address: \_\_\_\_\_

Property Owner Name: \_\_\_\_\_

Mailing Address: \_\_\_\_\_

Phone Number: \_\_\_\_\_

Email: \_\_\_\_\_

**\*One form must be completed for each PID account/service address.\***

### Property Manager Information

Property Management Company Name: \_\_\_\_\_

Property Manager Name: \_\_\_\_\_

Address: \_\_\_\_\_

Mailing Address (if different than above): \_\_\_\_\_

Phone Number: \_\_\_\_\_

Email: \_\_\_\_\_ E-Bills: Yes / No

I hereby request that the bill be sent to the above property manager. I understand that if the water bills are not paid, I am liable for them. If left unpaid all past due amounts will be added to the annual assessment as a tax lien as of June 30<sup>th</sup>.

I understand that once this contract is in effect, I will no longer receive a bill for the above listed account. This authorization gives the property manager access to all account information and to make rate changes which can affect the overall cost of service. I understand this contract will remain in effect until the time that I contact PID to cancel the contract. Cancellation of the contract must be provided in writing or by email.

Property Owner Signature \_\_\_\_\_ Date: \_\_\_\_\_

I am signing under penalty of perjury that I am the recorded owner of the property as listed above.