

ALTERNATE BILLING AGREEMENT FOR RENTAL ACCOUNTS

NAME _____

ACCT # _____

ADDRESS _____

PHONE # _____

I hereby authorize Crystal Clear Water Supply Corporation to send all billings on my account to the person(s) and address below until further written notice:

NAME _____

EFFECTIVE DATE _____

ADDRESS _____

I understand that under this Agreement, I will be given notice by the Corporation of all delinquencies on this account prior to disconnection of service. A notification fee may be charged to the account in accordance with the provisions of the Corporation's Tariff.

I also understand that I am responsible to see that this account balance is kept current, as is any other account in the Corporation. This account shall not be reinstated until all debt on the account has been paid in full.

Signature

Date