

SOUTH FREESTONE COUNTY W.S.C.

P.O. BOX 208

TEAGUE, TX 75860

903-389-5952

This institution is an Equal Opportunity Provider, and Employer

ALTERNATE BILLING AGREEMENT

FOR RENTAL ACCOUNTS

NAME: _____ **METER #** _____

ADDRESS: _____ **ACCT #** _____

I hereby authorize South Freestone County Water Supply Corporation to send all billings on my account to the person and address below until further written notice:

Renter Name _____

Address _____

City, State, Zip _____

Renter Phone Number _____

I understand that under this agreement that I will be given notice by the Corporation of all delinquencies on this account prior to disconnection of service.

I also understand that I am responsible to see that this account balance is kept current,

as is any other Member of the Corporation. Should this account remain delinquent, water service will be subject to termination under the policies of the Corporation, and shall not be reinstated until all debt on the account has been paid.

Member Signature _____

Date _____