



Commissioners of Leonardtown

41.660 Courthouse Drive
P. O. Box 1, Leonardtown, Maryland 20650

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J. HARRY NORRIS
Mayor

LASCHELLE E. MCKAY
Town Administrator

TENANT/OWNER AGREEMENT REQUEST FOR CHANGE IN BILLING

****THE ORIGINAL SIGNED FORM MUST BE RETURNED TO THE TOWN OFFICE****

Property Address: _____
Account Number: _____
Effective Date of Change: _____

Application is hereby made to have all bills for water, sewer and trash disposal charges, including all notices of any kind relating thereto, for the above property sent to:

TENANT'S NAME: _____
(Please Print or Type)

MAILING ADDRESS: _____

PHONE NUMBER: _____

CELL PHONE: _____

EMAIL: _____

SIGNATURE/DATE: _____

Copies of overdue payment notices will be sent to the Owner

It is understood and agreed that the mailing of bills pursuant to this request in no way relieves the **Owner** of the premises of equal liability for the payment of all charges and assessments so billed, and further that any bill so mailed shall be considered as notice to the **Owner** as if it were mailed to the **Owner**. Bills shall be rendered in accordance with this request until further notice in writing is given to The Commissioners of Leonardtown. **Owner** understands that requests for changes in billing to persons or entities other than the **Owner** are honored at the discretion of The Commissioners of Leonardtown or their designee. **Quarterly billing is for services already provided. Owner should recognize that tenant could potentially accrue 6 months worth of service charges before service would be terminated for non-payment. Please call Town office for payment status before tenant moves.**

OWNER'S NAME: _____
(Please Print or Type)

MAILING ADDRESS: _____

PHONE NUMBER: _____

CELL PHONE: _____

EMAIL: _____

SIGNATURE/DATE: _____

**BY SIGNING THIS FORM,
YOU ARE VERIFYING THAT
YOU HAVE READ AND
CLEARLY UNDERSTAND
THE RISKS ASSOCIATED
WITH THIS
AUTHORIZATION.**