

SAN MIGUELITO MUTUAL WATER COMPANY  
P.O. BOX 2120 AVILA BEACH, CA 93424  
(805) 595-2348 OFFICE (805) 595-7217 FAX

**TENANT-SERVICE AUTHORIZATION FORM**

**SHAREHOLDER INFORMATION:**

NAME OF SHAREHOLDER \_\_\_\_\_

**SERVICE ADDRESS:** \_\_\_\_\_

SHAREHOLDER BILLING ADDRESS: \_\_\_\_\_

SHAREHOLDER TELEPHONE: \_\_\_\_\_

IS THERE A PROPERTY MANAGEMENT COMPANY INVOLVED? ( ) YES ( ) NO

NAME OF PROPERTY MANAGER AND COMPANY: \_\_\_\_\_

I request that San Miguelito Mutual Water Company (SMMWC) allow any tenant to set up or terminate residential water service without my signature. I also request that if there is no new tenant upon termination, the water service be switched back into my name. I am aware that a failure to notify SMMWC of new tenants will result in my account being charged for all services. I am also aware that I am responsible for **all** charges to **any** account at this address, should a tenant fail to pay.

Would you like a copy of your tenant's bill mailed to you? ( ) Yes ( ) No

SHAREHOLDER SIGNATURE: \_\_\_\_\_ DATE: \_\_\_\_\_

OR

AUTHORIZED PROPERTY MANAGER: \_\_\_\_\_ DATE: \_\_\_\_\_

\*\*\*\*\*

FOR OFFICE USE:

Account #: \_\_\_\_\_ Date Received: \_\_\_\_\_ By: \_\_\_\_\_