

**BLACKLAND WATER SUPPLY CORP.**  
**6715 ST. HWY. 276**  
**ROYSE CITY, TEXAS 75189**  
**972-771-6375 – PHONE**  
**972-771-3276 – FAX**

**MAIL TO:**  
**P.O. BOX 215**  
**FATE, TX 75132**

**ALTERNATE BILLING AGREEMENT FOR**  
**RENTAL ACCOUNTS**

**NAME:** \_\_\_\_\_

**METER #** \_\_\_\_\_

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

**ACCT #** \_\_\_\_\_

\_\_\_\_\_

**PHONE #:** \_\_\_\_\_

**I hereby authorize Blackland Water Supply Co. to send all billings on my account to the person(s) and address below until further written notice:**

\_\_\_\_\_

**PHONE #:** \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

**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. You will receive a copy of the bill every month.**

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

**Signature** \_\_\_\_\_

**Date** \_\_\_\_\_