



**DESIGNATION OF AGENT FOR RECEIPT OF BILLING,
ONLINE ACCESS AND WAIVER OF RIGHT TO NOTICE**
(form must be completed in its entirety and signed by owner/manager to be valid)

Move in Date _____

Account # _____

I/We, _____ owner(s) of the property located at

_____, do hereby authorize and request that all billings for water and sewer services to said property be sent to the following person, firm, or organization and hereby authorize access to Rock Springs Municipal Utility Resident Portal for this account be released to the following person, firm or organization:

RESIDENT, FIRM OR ORGANIZATION INFORMATION:

Name: _____

Mailing: _____

Phone: _____

OWNER/PROPERTY MANAGER INFORMATION:

Name: _____

Mailing: _____

Phone: _____

In making this request of my own free will, I hereby acknowledge that, as legal owner of the aforesaid property, it remains my obligation to pay all bills for such services as they become due, and that, if such bills are not paid when due, I will become further obligated to pay such charges for interest, penalties, cost of notice, costs of disconnection and/or reconnections, and cost of collection as have been established by Governing Body of the City of Rock Springs, or as may be later established by said governing body or other body empowered to establish such charges. I also do hereby freely acknowledge and assume the responsibility of paying any and all such charges, resulting from failure by the above-designated agent to pay any bills as they became due and payable or otherwise.

In consideration for this request, I hereby agree that if any bill or other document regarding such services to this property is mailed or otherwise delivered to the above-designated agent, such mailings or delivery shall be equivalent to mailing or delivering, such a bill or document to me personally; and that no other notice of any billing, past due billing, intent to disconnect service, intent to initiate small-claims action; intent to file a lien against the property, or any other notice or document as may be required in the course of providing such services to this property, and do further agree to release, hold harmless, and indemnify the City of Rock Springs, its employees, agents, servants, boards, commissions, joint powers boards to which it is a party, heirs, successors and assigns from any liability sounding in court, breach of contract, or otherwise which may result from failure to send or receive any such notice.

I understand that by signing this waiver, I am releasing my right to receive bills, as well as online access to this account through Rock Springs Municipal Utility Resident Portal while it is active. I understand that it is my responsibility to notify Rock Springs Municipal Utility when this waiver becomes inactive so online accounts and/or auto pay can be disabled. I understand that if any payments are drafted upon failure to notify of a renter vacating, it will be my responsibility to reimburse the renter for any amount paid but not owed.

(Owner/Manager Initials) _____

OWNER/PROPERTY MANAGER SIGNATURE _____

DATE SIGNED _____

Subscribed and sworn before me this _____ day of _____, _____

SEAL

My Commission expires _____

FOR OFFICE USE ONLY

ARCHIVE ONLINE ACCT ☐ ENTERED ☐ OWNER INFO IN COURTESY BILL ☐ RENTAL IN ADD'L INFO ☐ ADD NOTE TO ACCT ☐

COMPLETED BY _____ DATE COMPLETED _____