## SOUTHEAST WATER SUPPLY CORPORATION P.O. BOX 640 CENTERVILLE, TX 75833 903-536-7514

## ALTERNATE BILLING AGREEMENT FOR RENTAL ACCOUNTS

NAME:	METER #:
ADDRESS:	ACCT #:
I hereby authorize Southeast Water Supply Corporation to person(s) and address below until further written notice:	send all billings on my account to the
NAME:	
MAILING ADDRESS:	
CITY, STATE, ZIP:	
PHONE:ALTERNATE:	
I understand that under this agreement that I will be given	notice by the Corporation of all delingue

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. A notification fee shall be charged to the account in accordance with the provisions of the Corporation's Tariff.

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

Signature\_\_\_\_\_

Date\_\_\_\_\_