Somerset County Sanitary District, Inc. 11916 Somerset Ave. Room 103, Box 1 Princess Anne, MD 21853

Phone: 410-651-3831 Fax: 410-651-5420

Water and Sewer Agreement for Alternate Address

Account Number:	
I,	hereby give permission for the water and
I,(Owner of Proper	.y)
sewer bill on(Addr	to be sent to:
Property Owners Name:	
Tenants Name:	c/o
Address:	
City, State, Zip:	
	*This is how the address will appear on the bill.
I understand that if my tenants or o	her occupants fail to pay this bill, I will be responsible for it.
(Signature of Owner)	(Date)
LLC's Only:	
I hereby certify that I am authorized	to act on behalf of the corporation.
Name – Please Print	(Date)
Position at Corporation	Signature