

Paradise Irrigation District

6332 Clark Rd, Paradise, CA 95969 · 530-877-4971 · Fax: 530-876-0483 · www.pidwater.com

DUPLICATE BILL AUTHORIZATION

Account & Property Owner Information Account Number: Service Address: _____ Property Owner Name: _____ Mailing Address: _____ Phone Number: _____ E-Bills: Yes / No Email: _____ *One form must be completed for each PID account/service address.* **Tenant(s) Information** Tenant(s) Name: _____ Mailing Address (if different than property address): Phone Number: _____ E-Bills: Yes / No I hereby request that a duplicate (second) bill be sent to the above (tenant). I understand that all bills, late fees, and other fees accrued on the account are the responsibility of the owner regardless of tenant status. If left unpaid, all past due amounts will be added to the annual assessment as a tax lien as of June 30th. I also understand that a fee of \$2.00 will be applied to the bill for each duplicate paper billing. This authorization gives the above listed individual(s) access to all account information. A new duplicate authorization will need to be signed by the owner with each new tenant. Duplicate bills returned by the post office as "Undeliverable", will be removed from receiving future bills. I understand it is my responsibility to cancel the duplicate billing when my tenant vacates the property. Cancellation of the contract must be provided in writing or by email. I would like to receive E-Bills and waive the \$2.00 duplicate billing fee: Yes / No Property Owner Signature ____

I am signing under penalty of perjury that I am the recorded owner of the property as listed above.