

CITY OF THREE FORKS  
PO Box 187  
Three Forks, MT 59752

***Owner / Designee Utility Billing Agreement***

Service address: \_\_\_\_\_ Account #: \_\_\_\_\_

I/We, \_\_\_\_\_ are the legal Owner(s) of the property at the above noted service address. I understand, per 7-13-4309, MCA, if I, my Designee (property manager), or my tenant defaults on payments, I, as property owner(s) am responsible for **any and all fees, including penalty fees and/or disconnection, due the City of Three Forks.** Charges shall be recoverable against me as a lien to the City of Three Forks if left unpaid.

The City is only able to print one physical bill. How would you like that bill to be handled:

**Select one:**

- Mail the utility bill in care of my Designee below. I understand I will NOT receive a duplicate physical bill. If I provide an email address the monthly bill will be also emailed to me. Late and disconnect notices will only be mailed to your designee, as they are not able to be emailed.*
- Utility bill will remain in my (Owner's) name and will be mailed to the my (Owner's) mailing address. Late and disconnect notices will be sent to my (Owner's) mailing address.*

I/We understand that I must notify the City of Three Forks in writing with any changes to my or my Designee's information (including name, address and phone number). This agreement is non-transferable and must be renewed for all Owner and/or Designee changes.

**PLEASE PRINT**

Owner's Name: \_\_\_\_\_

Owner's Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Owner's Phone Number: \_\_\_\_\_

**Property Manager/Designee Name** \_\_\_\_\_

Property Managers Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Property Managers phone: \_\_\_\_\_

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**OFFICE USE ONLY:**

Date received: \_\_\_\_\_ Completed by Employee Initials: \_\_\_\_\_

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I/We give permission for the City of Three Forks to discuss and disclose information on the utility bill, including providing a copy of the bill via email, for the \_\_\_\_\_ service address to the tenant listed below until a new agreement is signed. Please notify the City of Three Forks if there are any changes to this information.

Tenant(s) Name \_\_\_\_\_

Tenant(s) email address: \_\_\_\_\_

Tenant(s) phone: \_\_\_\_\_

**I/We have read the above and agree to abide by this agreement signed this:**

Day \_\_\_\_ of \_\_\_\_\_, 20\_\_\_\_\_, until such time I sign an updated agreement.

Signature: \_\_\_\_\_

**OFFICE USE ONLY:**

Date received: \_\_\_\_\_ Completed by Employee Initials: \_\_\_\_\_