

1300 12th Street SE, Suite 128. Watford City, ND 58854 Phone: (701)842-2821 Fax: (701)842-2822

For office use only Signed form_____ Deposit?____ ACH update_____ UBMax___ Tenant Acct#___ Owner Acct#___ Prior balance____ Scanned____

RURAL WATER SYSTEM TENANT AUTHORIZATION

Water Service Location: Quarter	Section	Township	N RangeW
Name on Account ("Member")			
Rural Water Service Address:			
City:			
Mamber Mailing Address			
Member Mailing Address:City:	State:		ZIP:
Contact Person: Member Telephone Number:			
Member email Address:			
Account Number:		NMENT	
The undersigned Member of the McKenzie of transfer of the rights and responsibilities of Tenant to have, direct and pay for the water	County Water Resouthe account describe	urce District ("District" ed herein to the Tenai	nt identified below, and authorizes the
Authorized Tenant Name:			
Contact Name:			
Mailing Address:			
City:			
Telephone Number:			
Email Address:			
Account Number:			
Tenant hereby agrees to pay the monthly for on the following date:	and eding address for Ter be bound by the Me	ending upon 30 day's v nant and an up to date	written notice by Tenant or Landlord. And emailing address for Landlord. During the
The Landlord hereby understands and agree liable for full payment of Tenant's obligation current, the Landlord will be responsible for	ns to the District and	d that if the Tenant fail	
Owner comments or stipulation for	renters:		
Date		Member Sig	nature
Date		Tenant Signa	ature