

Somerset County Sanitary District, Inc.
11916 Somerset Ave. Room 216, 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
(Owner of Property)

sewer bill on _____ to be sent to:
(Address of Property)

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 other 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