RURAL WATER, SEWER, AND SOLID WASTE MANAGEMENT

D I S T R I C T N O. 2 0 PITTSBURG COUNTY, OKLAHOMA

TENANT AUTHORIZATION

Effective Date: _____

To allow someone other than you (the Benefit Unit Owner) to receive the monthly water bill, please provide the current occupant information and sign below.

Benefit Unit Number:		
Occupant:		
Mailing address:		
City:	State:	Zip:
Contact phone number(s):		
Email Address:		

Bill Delivery Preference:
□ USPS Mail
□ Email

I authorize Pittsburg Co. RWS & SWM District #20 to mail billing statements to the above address. I further understand that if the deposit is not sufficient to cover the final bill, I, as the Benefit Unit owner, am responsible for any charges on the account. After the final bill is figured, if my tenant does not pay within ten (10) days, the District will look to me for payment IN FULL. This past due bill MUST be paid to avoid possible disconnection and forfeiture of the Benefit Unit and before another renter can be listed. Service Information:

I further understand that it is my responsibility to notify the Water District when a renter moves in or out.

Benefit Unit Owner: ____

Signed:

_____ Date: _____

(Benefit Unit Owner)

(Print Owner Name)

 Please check this box if you would like to receive a duplicate monthly statement via email and print your email address below.

If you have any questions about this process, please call our office at (918) 707-5515.

Meeting date approved: ______ Chairman: _____

_____ Vice-Chairman/Secretary: ______

8-15-2023