## **Brandon-Irene Water Supply Corp.**

P.O. Box 87 7416 SH 22 Brandon, Texas 76628 (254) 632-4120 Phone (254) 632-4121 FAX

## **ALTERNATE BILLING AGREEMENT FOR RENTAL ACCOUNTS**

NAME:	METER #:	
ADDRESS:	ACCT #:	
person(s) and address below ur	e Water Supply Corporation to send all billings on my account to th til further written notice:	e
_	eement that I will be given notice by the Corporation of all delinque ection of service. A notification fee shall be charged to the account of the Corporation's Tariff.	
service to an occupied rental pr	of my membership be canceled at this location, thereby discontinuing operty, that the Corporation will provide the above listed person wifive (5) days prior to the scheduled disconnection date.	•
	onsible to see that this account balance is kept current, as is any other account shall not be reinstated until all debt on the account has be	
Signature	Date	

"This institution is an equal opportunity provider and employer."