

ACWWA



Arapahoe County Water and Wastewater Authority

13031 East Caley Avenue, Centennial, CO 80111, (303) 790-4830, FAX (303) 790-9364

www.arapahoewater.org

OWNER – TENANT

I, _____, being the owner of property at _____, allow ACWWA to send a copy of the Statement of Service Charges to _____.
(THIRD PARTY NAME, SEE "*" BELOW FOR DETAILS)

Third party's Name

Owner's Name

Address

Address

City, State, Zip Code

City, State, Zip Code

Phone Number

Phone Number

Signature of Property Owner **Date**

Further authorizes tenant access to my account & billing information online at www.Arapahoewater.org

The owner of the property remains ultimately liable for such charges as stated in Section 6.4.4 of our Rules and Regulations.

***A Duplicate Bill fee will apply monthly for each third party bill processed on the account.**

* * * * *

Please remove tenant _____ from the property listed above.

Signature of Property Owner **Date**

Please fax completed form to (303) 790-9364 or deliver to: 13031 E. Caley Ave. Centennial, CO 80111