



# City of Kalama

Incorporated 1890

PO Box 1007  
195 N. First St.  
Kalama, WA 98625  
(360) 673-4554



## PROPERTY OWNER AUTHORIZATION (Form Must Be Filled Out Completely)

Date: \_\_\_\_\_

I verify I am the owner of the property located in Kalama, Washington, at \_\_\_\_\_  
\_\_\_\_\_.

As owner of this property, I hereby request that the following renter \_\_\_\_\_  
\_\_\_\_\_ be allowed to receive and pay the utility billing of the City of Kalama. **I understand I will be sent a copy of any late notices mailed to the tenant.**

This form acknowledges that the property owner is aware that even though the tenant is receiving the bill, should the tenant default, the property owner, by State law, [RCW 35.21.290 (water), 35.21.150 (garbage), 35.67.200 (sewer)] is still responsible for the payment of the water, sewer, and garbage bills. **I understand that as owner I am responsible to notify the City of any changes in tenants and that I am responsible for any bills that occur prior to the date of notification of new tenants and during vacancies.**

**I acknowledge I am still the responsible party for payment of the utility bills should the renter not make the scheduled payments.** If the renter is not able to make the scheduled payment, please take the following actions regarding the water account:

- Allow** partial payments/payment arrangements with tenant to avoid shut off. The City will notify you when a new bill is issued, and the previous bill remains unpaid.
  - Do not allow the outstanding balance past due to exceed \$\_\_\_\_\_.
- Do Not Allow** partial payments/payment arrangements and require balance to be paid in full to turn water back on should a termination of service for nonpayment occur.

**NOTICE**

If a complete mailing address is not provided for the tenant, the utility bill will be sent to the property owner.

\_\_\_\_\_  
PROPERTY OWNER SIGNATURE

PROPERTY OWNER PRINTED NAME AND ADDRESS:  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Owner Phone: \_\_\_\_\_

Owner E-Mail: \_\_\_\_\_

TENANT(S) PRINTED NAME AND ADDRESS:  
\_\_\_\_\_

Tenant Phone: \_\_\_\_\_; Tenant E-Mail: \_\_\_\_\_

\_\_\_\_\_  
CLERK SIGNATURE