CITY OF MILTON-FREEWATER AUTOMATIC CUT-IN AGREEMENT

The undersigned hereby agree to the following terms and conditions in order to have utility service(s) automatically cut into their name:

Account #	Services address	Services
		(E,W&S,R)
		(E,W&S,R)
		(E,W&S,R)
		(E, W&S, R) (Water service requires sewer to be billed.)
I	request that the City of Milton-F	
for the above listed account(s)	in my name in the event that the prior	account holder discontinues services.
I understand that I must have a	current application for services on file	e, maintain good credit with the City
and that a service start-up fee v	vill be billed each time service(s) are p	out in my name. I further understand
that this application is in effect	all twelve (12) months of the year.	
I authorize the following, as pro	perty management, to act on my beha	lf in regards to this/these account(s).
Contact person is:	Ph	ione:
(Address / PO Box)		City / State / Zip)
Any changes in property n	nanagement must be given, in w	riting to City of Milton-Freewater
Administrative Services Depa	rtment.	
	e discontinued for non-payment from	•
	n my name. This agreement will remain	
terminate the agreement is rece	ived by the City of Milton-Freewater	Administrative Services Department.
By signing this agreement I agr	ee to be personally liable for any bala	nce(s) on the above listed account(s),
	and that failure to make any payment a	
	disconnected without further notice.	
Signature	Date	
Oighathi C	Date	
Signature	Date	•
This agreement is accepted on	behalf of the City of Milton-Freewate	r by:
Signature	Date	