

## REQUEST FOR RESIDENTIAL ALTERNATE BILLING

Property Type	: RESIDENTIAL- Property Manager F	Billing Only		Account#:
Please transfe	r the billing for:			Zip Code
		(Property Address)		
				C/0:
Mailing addres	SS: (If different than property address)			
Phone:	Email:		Other Co	ontact Info:
I,(Printe	d name of property owner(s))	, do hereby state that I am the property owner of the property address listed above		
(the "Property to the Property alternate party account balance	"). I acknowledge that as the Propert y, and I agree to pay the account ba named does not. I also understand	y owner, I am resplance in full, incluthat the transfer of e name of the alter	oonsible for ding all part f billing re trnate part	for all charges for garbage collection service provious penalties and costs of collection if applicable, if requested herein will not take place until the exist try are for my personal convenience only; it does
Alternate Bill	ing Terms			
autom the bi Mana The I Prope Accor and th Pursu shall neces Each If nei for ali	natically terminates and billing will redilling date). Billing will also revert bategement Contract has expired. Property owner will not receive billing erty owner. Reference: RCW 35.21.2 unts that remain delinquent may be as the Property owner will be responsible than to the Revised Code of Washingt become a lien against the Property. Listary.  time there is a change of alternate bill ther the alternate party nor the Propert ternate billing will be allowed by Reputs and Comment I certify that I have read,	vert back to the Prock to the Property  ags or notices of a 17.  signed to Republic for the costs of colon, Chapter 35.21, ens will be filed while the costs of the costs of colon, Chapter 35.21, ens will be filed while the costs of colon, Chapter 35.21, ens will be filed while the costs of colon, Chapter 35.21, ens will be filed while the costs of colon with the costs of colon with the costs of the costs	operty ow owner if t ccount sta Services' lection. and Rent ith the Kir athorizatio unpaid bala	account is kept in a current status. This authorizate wher if the account becomes delinquent (75 days from the alternate party informs Republic Services that the alternate party informs Republic Services that the account reverts back to account r
	Signature of Property Owner		•	Chaha /Zin
Owner's Mailin	ng Address		ııy	State/Zip
signature, <u>or</u> t you acknowled was the result	he Property owner may have the form dge that (1) by choosing to send a sca of fraud or (2) that any illegibility crea	n notarized below. n of the document ated by the scannii	If you are , you are ware process	Initial Here
SORSCKIRED A	.ND SWORN to me thisday	, OL		
		Notary's Signatu	re	
		Print Notary's Na Notary Public in a		ne State of
		Residing at		
		My commission 6	expires	

## REQUEST FOR RESIDENTIAL ALTERNATE BILLING



Dear Customer,

Billing to residential tenants is not available and bills will only be sent to the owner of the property. Republic Services will bill your <u>property manager</u> with the submission of this Alternate Billing Form. Please complete the form and read the terms of the agreement that must be met in order to keep the alternate billing in effect.

The legal owner of the property must fill out the alternate billing form and state the name and billing information of the party to be the recipient of the billing statement. A property manager may fill out the form on the property owner's behalf if they are in possession of and can provide a copy of a <u>management contract and a limited or special power of attorney</u> pertaining to the property in question. Without both of these documents the legal property owner will be responsible for completing the alternate billing form.

Mail completed forms to: Republic Services

Attn: Alternate Billing 1600 127<sup>th</sup> Ave Ne Bellevue, WA 98005

Or Email to: RentonTenantForm@republicservices.com