

## REQUEST FOR NON-RESIDENTIAL ALTERNATE BILLING

| Property Typ  | pe: NON-RESIDENTIAL-Com   | nercial Tenant <i>or</i> Property Manager Billing Account#:  |
|---|---|--|
| Please trans  | fer the billing for:  | Zip Code   |
|   | _   | (Property Address)   |
|   | •   | C/O:   |
| Ü   |   | ss)  |
| Phone:  | Email:  | Other Contact Info:  |
| I,  |   | , do hereby state that I am the property owner of the property address listed a  |
| (the "Proper<br>to the Prope<br>alternate par<br>account bala | ty"). I acknowledge that as the orty, and I agree to pay the acty named does not. I also ununce is paid in full. Billings m       | e Property owner, I am responsible for all charges for garbage collection service procount balance in full, including all penalties and costs of collection if applicable, derstand that the transfer of billing requested herein will not take place until the exade in the name of the alternate party are for my personal convenience only; it do by to pay for service provided to the Property. |
| Alternate B   | illing Terms  |  |
| • The auto the Proj   | e alternate party named on this omatically terminates and billing billing date). Billing will also perty has been vacated or that | form will be billed as long as the account is kept in a current status. This authorizes will revert back to the Property owner if the account becomes delinquent (45 days revert back to the Property owner if the alternate party informs Republic Services the Management Contract has expired   |
| Pro   | perty owner. Reference: RCV   |  |
|   |   | hay be assigned to Republic Services' collection agency in the name of the property of ponsible for the costs of collection.   |
| • Pur   | rsuant to the Revised Code of   | Washington, Chapter 35.21, and Renton Municipal Code, Chapter 8-1, delinquent cloperty. Liens will be filed with the King County Recorder's Office by the City of Ren  |
| <ul><li>Eac</li><li>If n</li></ul>                            | ch time there is a change of alt  | ernate billing it voids this authorization, and the Property owner must submit a new for the Property owner pay any unpaid balance for service to the Property, no similar agreed by Republic Services.  |
| By signing th   | his document I certify that I h   | ave read, understand and agree to abide by the terms of this request for alternate bi  |
| Property Ow   |   | Phone# ()Email:  |
|   | Signature of Proper   | y Owner  |
|   |   | CityState/Zip  |
| Owner's Mai   | iling Address   |  |
| signature, <u>or</u><br>you acknowl                           | the Property owner may have edge that (1) by choosing to se   | er's license or state identification must be submitted with this form to verify the own the form notarized below. If you are sending a scanned copy via email please initial nd a scan of the document, you are waiving the right to later claim that (1) the docu collity created by the scanning process invalidates the document  |
| SUBSCRIBED  | AND SWORN to me this  | day of,  |
|   |   | <del></del>  |
|   |   | Notary's Signature   |
|   |   | Print Notary's Name Notary Public in and for the State of  |
|   |   | Residing at  |
|   |   | My commission expires / /  |



## REQUEST FOR NON-RESIDENTIAL ALTERNATE BILLING

Dear Customer,

Republic Services will bill your commercial property manager or commercial tenant 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: Renton Alternate Billing 212 Wells Ave S, Suite 104 Renton, WA 98057

Or Email to: RentonTenantForm@republicservices.com