



RAMONA MUNICIPAL WATER DISTRICT

105 EARLHAM STREET
RAMONA CA 92065

CUSTOMER SERVICE (760) 788-2200
Fax (760) 788-2202

To: Utility Customer
From: R.M.W.D. Customer Service Dept
Subject: Customer Reference Form and owner authorization

In order to have a name changed on your account, the District requires the following:

1. The enclosed reference form must be completed, signed and returned to the Customer Service Department.

A NEW CUSTOMER REFERENCE FORM NEEDS TO BE COMPLETED EVEN IF YOU HAVE HAD PREVIOUS SERVICE WITH THE DISTRICT.

2. If you are the tenant the enclosed authorization form must be completed, signed and returned to us by the owner or the owner's agent

A NEW OWNER AUTHORIZATION FORM NEEDS TO BE COMPLETED EVERY TIME THERE IS A CHANGE OF TENANTS.

When the necessary form is received by the Customer Service Department, the name on your account will be changed. If you have any questions, please feel free to contact the Customer Service Department at (760) 788-2200.

EFFECTIVE JULY 1, 1996 THERE IS AN ACCOUNT SET UP FEE OF \$20.00

THIS WILL BE ON YOUR FIRST BILL.

RAMONA MUNICIPAL WATER DISTRICT

105 EARLHAM STREET
RAMONA CA 92065

Office (760) 789-1330 Customer Service (760) 788-2200 San Diego (619) 579-7575 Fax (760) 788-2202

CUSTOMER REFERENCE FORM

ACCOUNT: _____ SERVICE ADDRESS: _____

PROPERTY OWNER: _____ DATE OF TITLE CHANGE: _____

BUSINESS NAME (if applicable): _____

MAILING ADDRESS: _____

PHONE: home () _____ work () _____ cell () _____
CITY STATE ZIP CODE

IF THE BILL IS TO BE SENT TO A TENANT OR LESSEE THE INFORMATION BELOW MUST BE COMPLETED:

TENANT/LESSEE: _____ DATE OF RENTAL AGREEMENT: _____

MAILING ADDRESS: _____

PHONE: home () _____ work () _____ cell () _____
CITY STATE ZIP CODE

PLEASE COMPLETE THE FOLLOWING INFORMATION FOR OWNER OR TENANT/LESSEE:

EMPLOYER: _____ PHONE: () _____

EMPLOYER ADDRESS: _____ HOW LONG: _____

SPOUSES NAME _____

SPOUSES EMPLOYER: _____ PHONE: () _____

EMPLOYER ADDRESS: _____ HOW LONG: _____

NAME OF RELATIVE NOT AT SAME ADDRESS: _____ RELATIONSHIP: _____

ADDRESS: _____ PHONE() _____
CITY STATE ZIP CODE

The undersigned agrees to assume responsibility for all charges on the account from the date of title or agreement. Any changes in the billing name, address, or phone numbers will be notified to R.M.W.D. The undersigned further agrees to notify R.M.W.D. when their responsibility ceases and to provide R.M.W.D. with a correct forwarding address for any closing bill to the account. If, at any time, the account is overdue, R.M.W.D. retains the right, after sufficient notice, to lock the water meter. The account will be charged any applicable late fees, deposit, and unlock fees, in accordance with district policy. If the charges remain unpaid R.M.W.D. retains the right to remove the meter and file a lien against the customer*. To have a meter reinstalled would require payment of all fees applicable to install a new service.

The undersigned agrees to assume responsibility for fire/paramedic service fees and sewer service fees, if applicable, billed by R.M.W.D.

*California Water Code sections 72100 & 72102, allows R.M.W.D. to impose a lien when payment for water service is delinquent. The lien secures unpaid charges. You will be responsible for the unpaid charge, interest, and any associated fees, before the lien will be released. Consult your attorney for more information.

I/WE HAVE READ AND UNDERSTAND ALL THE ABOVE

Signature _____ Date _____ Signature _____ Date _____

Print Name _____ Title (owner/tenant) _____ Print Name _____ Title (owner/tenant) _____

Note: Only signature name(s) will be on account
reform



RAMONA MUNICIPAL WATER DISTRICT

105 EARLHAM STREET
RAMONA CA 92065

CUSTOMER SERVICE (760) 788-2200
FAX (760) 788-2202

OWNER AUTHORIZATION FORM

ACCOUNT: _____ SERVICE ADDRESS: _____

OWNER OF PROPERTY: _____
Please print or type

MAILING ADDRESS OF OWNER: _____

PHONE: home _____ work _____ cell _____ City _____ State _____ Zip Code _____
fax _____

NAME OF PROPERTY MANAGER (if applicable): _____

ADDRESS OF PROPERTY MANAGER: _____

PHONE OF PROPERTY MANAGER: _____ City _____ State _____ Zip Code _____

TENANT OR LEASEE: _____
Please print or type

EFFECTIVE DATE OF RENTAL/LEASE AGREEMENT: _____

As owner of this property, receiving water, and services from the Ramona Municipal Water District, I hereby authorize R.M.W.D. to deliver to the tenant/leasee, named above, billing for service from the effective date. This agreement will remain in effect until this tenant/leasee vacates the property at which time the District is to be notified. This agreement may be terminated, in writing, by either myself or R.M.W.D. If, at any time, the account is overdue, R.M.W.D. retains the right, after sufficient notice, to lock the water meter. The account will be charged any applicable late fees, deposit, and unlock fees, in accordance with district policy. If the charges remain unpaid R.M.W.D. retains the right to remove the meter and file a lien against the customer*. To have a meter reinstalled would require payment of all fees applicable to install a new service.

The undersigned agrees to assume responsibility for fire/paramedic service fees and sewer service fees, if applicable, billed by R.M.W.D.

*California Water Code sections 72100 & 72102, allows R.M.W.D. to impose a lien when payment for water service is delinquent. The lien secures unpaid charges. You will be responsible for the unpaid charge, interest, and any associated fees, before the lien will be released. Consult your attorney for more information.

I UNDERSTAND THAT I WILL BE LIABLE FOR ANY UNPAID BILLING WITH THIS AGREEMENT PURSUANT TO CALIFORNIA WATER CODE SECTIONS 72100 & 72102.

Signature of property owner Date

Signature of property manager* Date

*AS PROPERTY MANAGER, I AGREE TO NOTIFY THE RAMONA MUNICIPAL WATER DISTRICT IN WRITING WITHIN TEN DAYS OF TERMINATION OF MY CAPACITY TO ACT AS AGENT FOR THIS PROPERTY.

oath