



City of St. Anthony
420 N Bridge, Suite A
St. Anthony, ID 83445

Phone: 208-624-3494
Fax: 208-624-4003

RENTAL PROPERTY:

BILLING DIRECTIVE INFORMATION FOR PROPERTY OWNER OR PROPERTY MANAGEMENT COMPANY (LANDLORD)

Would you prefer the utility bill be sent directly to the tenant at the property address? If so, here is some information we need to receive and/or share with you, the Property Owner/Manager before we can bill the tenant directly.

- Please complete and return the attached **CITY OF ST ANTHONY UTILITY Billing Directive** form.
- Signatures **MUST BE** notarized. (*Notary services are available at Utility Billing inside City of St Anthony City Hall*).
- If submitted by a Property Management Company, a Management Agreement must be attached with the Billing Directive if one has not already been provided for this service address.
- If the address changes for the property owner or Property Management Company, please notify us in writing as soon as possible.
- A New tenant's name will be added to the bill as soon as we receive this signed and notarized form from you AND a signed and notarized Renter's Addendum form from the tenant. It is your responsibility to make sure all balances prior to the tenant's move-in are paid. An unpaid balance from a previous tenant can/will result in service disconnection to a new tenant.
- As the Property Owner/Manager it is your responsibility to notify the City of St Anthony of vacancy or tenant move-in/out for a final read or you will be held responsible for any charges incurred up to the notification to the City of St. Anthony.

THE PROPERTY OWNER IS STILL ULTIMATELY RESPONSIBLE FOR PAYMENT OF THE BILL. MONTHLY BILLS WILL BE SENT ONLY TO THE TENANT; HOWEVER, BOTH TENANT AND LANDLORD WILL RECEIVE DELINQUENCY NOTICES. ANY AMOUNT LEFT UNPAID UPON A TENANT'S MOVE-OUT BECOMES THE RESPONSIBILITY OF THE PROPERTY OWNER TO PAY.

CITY OF ST ANTHONY
UTILITY BILLING DIRECTIVE FORM

TODAY'S DATE: _____ LOCATION #: _____

SERVICE ADDRESS: _____

The Property Owner/Manager of the above described property and location, does hereby instruct the St Anthony Utility Billing Services to prepare the monthly billing statement for water, sewer and garbage for the above referenced address and relinquish my/our authority to terminate services to property while occupied by the tenant.

I DO HEREBY ACKNOWLEDGE I WILL REMAIN RESPONSIBLE FOR UNPAID ACCOUNT BALANCES FOR WATER, SEWER, AND GARBAGE, AS PROVIDED BY THE ST ANTHONY CITY CODE. IF ANY OF MY TENANTS MOVES OUT AND LEAVES A BALANCE OF ANY SIZE I UNDERSTAND AS THE PROPERTY OWNER I WILL BE RESPONSIBLE FOR PAYMENT OF SAID DEBT. *Owner/PM Initials* _____

I will ensure all balances prior to any of my tenant's move-in are paid and understand any unpaid balances can/will result in service disconnection to the above stated address. I also understand tenants will be directed to contact their landlord or Property Owner/Management Company should the utilities be terminated due to non-payment of services prior to their move-in date. *Owner/PM Initials* _____

I understand this utility billing account will remain in the "Property Owner" name and sent to the person named herein at my request. I will notify the City of St Anthony Utility Billing Department of vacancy for a final read. *Owner/PM Initials* _____

I acknowledge I will not receive monthly statements for this account. If the account becomes delinquent I will be sent a copy of each delinquency notice sent to the tenant. I further agree any and all amounts due for water, sewer, and garbage shall constitute a lien on the real property which will secure the amounts due. Termination of service to the property will not release any lien for amounts due. *Owner/PM Initials* _____

I permit the City of St Anthony to release any information requested about this account to any tenant during their tenancy. The information released may be, but is not limited to; the account balance, payment history, or delinquency status. *Owner/PM Initials* _____

THIS REQUEST SHALL REMAIN VALID UNTIL THE PROPERTY OWNER OR PROPERTY MANAGER NOTIFIES THE CITY OF ST ANTHONY AND/OR A NEW DIRECTIVE IS PROVIDED AND FILED WITH THE CITY OF ST ANTHONY

MUNICIPAL BILLING SERVICES AT 420 N BRIDGE, SUITE A, ST ANTHONY, ID 83445. *Owner/PM Initials*_____

I do hereby certify I am the owner or the duly authorized agent to make this request for the owner of the subject property receiving the service. By signing below, I further acknowledge I have read, understand, and agree to the terms and conditions set forth above.

Signed:_____ Dated:_____
Owner:_____ Property Manager _____

Printed Name:_____ Phone #: _____

Owner/Property Manager Billing Address: _____
City:_____ State:_____ Zip:_____

STATE OF IDAHO)
) ss.
County of Fremont)

On this ____ day of _____, 20_____, before me, the undersigned, a Notary Public in and for said County and State, personally appeared _____ and _____, known or identified to me to be the persons whose names are subscribed to the within and foregoing instrument and acknowledged to me they executed the same.

IN WITNESS WHEREOF, I have hereunto set my hand and affixed my official seal, the day and year in this certificate first above written.

Notary Public for Idaho
Residing at:
My Commission Expires:

-----NOTARY USE ONLY-----
Identification Verified

ID Type:_____ ID #:_____ State:_____



City of St. Anthony
420 N Bridge, Suite A
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Phone: 208-624-3494
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RENTAL PROPERTY:

TENANT (RENTER) INFORMATION

Moving in to a rental property? Has the Property Owner/Management Company (landlord) requested/required you put the water, sewer and garbage in your name? If so, here is some information we need to receive and/or share with you before we can put your name on the account.

- Please complete and return the attached **Renter's Addendum**.
- Your signature **MUST BE** notarized. (*Notary services are available at Utility Billing inside City of St Anthony City Hall*).
- We do require additional paperwork from the Property Owner/Management Company (landlord). Once we have received all required information, we will add your name to the account.
- Our accounts do not travel with the customer; they stay with the property. This means if there is any outstanding balance on the account at the time of your move in, your services may be impacted and you should contact the Property Owner/Management Company (landlord) to make sure a payment is being made to clear the account.
- Please notify us of your scheduled move out date as soon as possible. Your final bill may be impacted if you wait until you have already moved to inform us.

ONLY PERSONS LISTED ON THE ACCOUNT OTHER THAN THE PROPERTY OWNER/MANAGEMENT COMPANY WILL BE ABLE TO OBTAIN PAYMENT /BILLING INFORMATION AND/OR MAKE PAYMENT ARRANGEMENTS AS NECESSARY.

RENTER'S ADDENDUM

I _____ do hereby declare I am tenant and therefore a resident at _____, St Anthony, ID 83445 and will be responsible for the payment of the City of St Anthony Utility Bill for water, sewer, and garbage at the previously stated property during my tenancy. Telephone Number for Account: _____

Complete this section only if you want the monthly bills to be sent to you at a different Mailing Address: _____
City: _____ State: _____ Zip Code: _____

I acknowledge, during my tenancy, I will receive a monthly statement from the City of St Anthony with a balance due each month. I agree I will submit payment for any balance promptly and on time each month. If payment is not received each month, I acknowledge my landlord will receive a copy of the delinquent notice sent to my residence. *Tenant's Initials* _____

By signing this form I permit the City of St Anthony to release any information requested about this account to my landlord. The information released may be, but is not limited to; the account balance, payment history, or delinquency status. *Tenant's Initials* _____

Signed: _____ Dated: _____

STATE OF IDAHO)
) ss.
County of Fremont)

On this ____ day of _____, 20____, before me, the undersigned, a Notary Public in and for said County and State, personally appeared _____ and _____, known or identified to me to be the persons whose names are subscribed to the within and foregoing instrument and acknowledged to me they executed the same.

IN WITNESS WHEREOF, I have hereunto set my hand and affixed my official seal, the day and year in this certificate first above written.

Notary Public for Idaho
Residing at:
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