



CHARLOTTE COUNTY UTILITIES

25550 Harbor View Rd, Suite 1
Port Charlotte, FL 33980-2503
Phone: 941.764.4300 Fax: 941.764.4557
Email: ccusupport@CharlotteCountyFL.gov

COURTESY COPY BILL REQUEST FORM

Only one paper bill per account will be provided by CCU. Ordinance 2007-179 (Charlotte County Utilities Credit and Collections, Section 1, Item C) states: "All residential accounts shall be established in the name of the owner of the property, with the owner of the property being responsible for all charges due." As a convenience to the Property Owner, Charlotte County Utilities (CCU) will, upon request, send a copy of the bills to and receive payment from an Authorized Agent or Tenant in Good Standing\*. This in no way relieves the Property Owner of liability for charges. CCU will not be obligated to notify the owner/principal of non-payment of bills or other charges incurred by Agent or Tenant.

Please Print or Type Below

I, \_\_\_\_\_, as Owner or Authorized Agent of the property located at:
Your Name (Required)

Property Address (Required)

CCU Account Number (Optional)

hereby authorize Charlotte County Utilities to send a copy of the monthly Utilities bill for this property to:

Name of Tenant or Authorized Agent (Required)

Tenant's Driver License No. (Required)

State of Issuance (Required)

Last 5 digits of Tenant's SS# (Required)

Tenant's Phone Number (Required)

Tenant's E-mail Address (Optional)

Tenant's Prior Address (Required)

Owner's Mailing Address (Required)

Owner's Phone Number (Required)

Owner's E-mail Address (Required)

Authorized Agent's Phone Number (if applicable)

Effective Date of Occupancy (Required)

- Owner receives an electronic bill (eBill) through CCU's Vuebill system
The Tenant will receive copy of monthly statement beginning with the next scheduled read date
The Owner will receive all CCU bills and correspondence
The Owner/Agent is responsible to notify Utilities when a Tenant/Agent status changes
The Owner/Agent must notify Utilities of owner's change of mailing address, phone or e-mail address.
The Owner is responsible for any balance on the account and is subject to disconnection of services at the property and subject to further collection action if unpaid in compliance with Charlotte County Utilities Credit and Collections Policy

I am the Owner/Authorized agent for the property listed above. I am aware that it is my responsibility to ensure my tenant receives a copy of the bill. I am aware, as the Owner/Authorized agent that if CCU finds that tenant is not in good standing\*, that the Owner is fully responsible for all costs incurred by leasing this premise to this tenant. I attest that I have read this document in its entirety and acknowledge this by my signature below.

Signature of Property Owner or Authorized Agent (Required)

Date (Required)

\* Agent/tenant will be deemed in good standing unless Utilities database shows history of tampering, unauthorized use, outstanding balance on another Charlotte County Utilities account, returned payment or any other unlawful activity.

Office Use Only:

CCU Account Number: \_\_\_\_\_ Tenant Customer Number: \_\_\_\_\_

Tenant Status: In Good Standing [ ] Not In Good Standing [ ]

Tenant added to Owner's account on (Date): \_\_\_\_\_ Tenant NOT added to Owner's account (Date): \_\_\_\_\_

Reason Tenant NOT added to Owner's account: \_\_\_\_\_

Notified Owner: \_\_\_\_\_ Agent: \_\_\_\_\_ Notified by: Email: \_\_\_\_\_ Mail: \_\_\_\_\_ Phone: \_\_\_\_\_ Fax: \_\_\_\_\_ Date: \_\_\_\_\_ that Tenant was not added to Owner's account.

CSR Initials: \_\_\_\_\_ Date: \_\_\_\_\_