

**CITY OF COLSTRIP  
DUPLICATE BILL REQUEST**

RESIDENT/TENANT NAME \_\_\_\_\_

SERVICE ADDRESS \_\_\_\_\_

MAILING ADDRESS \_\_\_\_\_

CITY \_\_\_\_\_ STATE \_\_\_\_\_ ZIP \_\_\_\_\_ PHONE # \_\_\_\_\_

DATE RENTER BEGINS OCCUPANCY \_\_\_\_\_

No customer shall re-meter, sell or permit others to use this service. In no case may a water line, pipe or hose be extended across or under public or private property, street or alley to provide water to another. A \$10.00 fee will be charged on past due accounts, a \$15.00 fee for mailed termination notices and \$25.00 fee for hand delivered termination notices. If service is terminated due to non-payment, the entire balance of the account plus a \$50.00 reconnect fee must be paid before services will be resumed.

This request is for a duplicate bill to be sent to the tenant/resident of the above mentioned property. By signing below and submitting this request, I understand the utility account is not in my name. Since I will be receiving a copy of a bill belonging to the property owner, I understand there may be charges on the bill that do not belong to me and it is between the property owner and myself (NOT the City of Colstrip) to determine who will pay the charges on the bill. I also understand there will be a one-time \$25.00 service fee charged to process this request and send a duplicate bill to me.

\_\_\_\_\_  
Applicant Signature

\_\_\_\_\_  
Date

**LANDOWNER**

**The property owner or agent must complete this section**

PROPERTY OWNER OR AGENT \_\_\_\_\_

CONTACT NAME (If different than Property Owner) \_\_\_\_\_

MAILING ADDRESS \_\_\_\_\_

PHONE # \_\_\_\_\_

I hereby give permission for a duplicate bill for water and sewer services be sent to the resident/tenant. I am aware that the property owner is still responsible for the bill per the Rules and Regulations Governing Utility Services for the City of Colstrip, including ALL fees and charges charged to the utility account.

I understand this agreement does not relieve the property owner of financial or any other responsibilities regarding water and sewer service to this property.

\_\_\_\_\_  
Property Owner or Agent Signature

\_\_\_\_\_  
Date

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**City Use Only**

Account # \_\_\_\_\_

Date Application Received \_\_\_\_\_

Processed By \_\_\_\_\_

Date \_\_\_\_\_