

## **Third Party Authorization Form**

Date.		
Account# (optional):	Folio# (optional):	Phone:
Owner(s):		
Service Address:		
<ul> <li>must be rendered to the</li> <li>The <u>property owner</u> need Department located at C</li> <li>Giving access to your account on your be</li> <li>The property owner or the</li> </ul>	owner of the property to who do not complete this form and lity Hall, if you wish to give account will allow the third part half.	
written notice to the Fina	ance Department.	
Please read and <u>initial</u> :		
It is the responsibility of Initial	the <u>property owner</u> to make	sure the account is paid in full.
, , , , , , , , , , , , , , , , , , , ,	amount, including dishonored will be transferred to the pro	
Please initial: the account(s) you	would like to give access to	your third party.
Utility Account		
Property Tax Account		
Name of the third party (please	print):	
Name:		
Authorized by:		
Signature of property owner:		
Print Name:		
Note: If the account is in a compo	any name, please provide dod	