



Water Dept.------(519) 867-2128
 Public Works Dept.------(519) 867-2993
 Fax------(519) 867-3886
 Email-----publicworks@twp.stclair.on.ca
 1155 Emily St. Mooretown, ON. N0N 1G0

Tenant and Owner Letter of Understanding
Water and Sewage Charges

Date: _____

Occupancy Date _____ Property Address: _____
 Account # _____

Dear Sir/Madam:

As owner of the above property, please accept this letter as direction and authorization to mail invoices for water and sewer charges to my tenant at the above address. This is to be in effect until further notification in writing regarding any change to billing information.

I agree to accept full responsibility for any applicable charges which are not paid by my tenant upon notification from St. Clair Township Water Department.

Owners Name: _____

Please Print Clearly

Address: Street _____
 P.O. Box _____
 City & Prov. _____
 Postal Code _____
 Phone No.: _____
 Email Address: _____

Owner's Signature: _____

Tenant's Name: _____

Please Print Clearly

Address: Street _____
 P.O. Box _____
 City & Prov. _____
 Postal Code _____
 Phone No.: _____
 Email Address: _____

Tenant's Signature: _____