



Serving the Community Since 1965

148 SOUTH WILSON STREET POST OFFICE BOX 326 NIPOMO, CA 93444 - 0326
(805) 929-1133 FAX (805) 929-1932 Website address: ncsd.ca.gov E-mail: billingclerk@ncsd.ca.gov

UTILITY BILLING DUPLICATE NOTICE – REQUEST FORM

This agreement is between the NIPOMO COMMUNITY SERVICES DISTRICT and the undersigned PROPERTY OWNER OR AUTHORIZED PROPERTY MANAGEMENT. One form will be required for each property/account serviced by the District.

I hereby request that a duplicate cycle bill and late notice, if applicable, be mailed to the service address (a mail receptacle at this address is required). If applicable, a door-hanger will be delivered to the service address only, at least forty-eight hours before discontinuance of the water service.

I understand that this request will be in effect until cancelled, in writing, by the property owner or property management representative. I further understand and acknowledge that I, as the property owner or property management representative, am responsible for the payment of all charges for the water and/or sewer and all other charges and fees as billed by Nipomo Community Services District.

I understand that the District does not start and stop water service when tenants move in or out and the duplicate billing coincide with regular meter reading cycles. I also understand and acknowledge that commencement and/or cancellation of this Utility Billing Duplicate Notice must be received by the end of the month prior to the mailing of the next regular billing cycle. I also understand and acknowledge that the charge for this notice, **\$1.50 per billing cycle**, will be included on each statement.

SERVICE ADDRESS _____

NCSD ACCOUNT NUMBER _____ DATE _____

PROPERTY OWNERS NAME _____

PROPERTY MANAGEMENT COMPANY _____
(If applicable)

PROPERTY OWNER OR REPRESENTATIVE SIGNATURE _____

PHONE NUMBER _____

Date activated _____ 1ST Cycle mailed _____ Location # _____