

## NIPOMO COMMUNITY SERVICES DISTRICT

148 SOUTH WILSON STREET POST OFFICE BOX 326 NIPOMO, CA 93444 - 0326 (805) 929-1133 FAX (805) 929-1932 Web site address www.ncsd.ca.gov

## **UTILITY BILLING DUPLICATE NOTICE**

One form will be required for each property/account serviced by the District.

Duplicate Billing is a service offered to property owners who have tenants. It allows the District to send a copy of the bill to the 'RESIDENT' at the property address.

This agreement is a request or modification between the NIPOMO COMMUNITY SERVICES DISTRICT and the undersigned PROPERTY OWNER OR AUTHORIZED PROPERTY MANAGEMENT.

Nam	e on Account:	
Serv	ice Address:	
NCSD Account Number:		
Tele	ohone Number:	
Emai	il Address:	
	I hereby REQUEST a duplicate cycle bill for t receptacle at this address is available. A char on each statement.	
	I hereby request CANCELLATION of the dup	icate cycle bill for the service address listed
that I as	estand that this request will take effect prior to s a property owner/owner representative am u account.	<u> </u>
	Signature	Date
	Printed Name	_