



Region of Waterloo

## Authorization to forward mail to property management company

Water and wastewater account number: \_\_\_\_\_

Property owner(s): \_\_\_\_\_

Property owner's address: \_\_\_\_\_

Property owner's phone number: \_\_\_\_\_ Work phone number: \_\_\_\_\_

Mail my water and wastewater bill to the below property management company:

Name: \_\_\_\_\_

Address: \_\_\_\_\_

Contact: \_\_\_\_\_

Phone number: \_\_\_\_\_ Fax number: \_\_\_\_\_

Email address: \_\_\_\_\_

### Owner

By signing this form, I (we) authorize the Region of Waterloo (hereinafter referred to as "the Region") to forward Water & Wastewater Notices and Bills for the above noted service address to the Property Management Company indicated.

I further Agree:

1. That I (we) will remain solely responsible for any Water & Wastewater bills and any other additional fees and/or charges that may come due for the above noted service address.
2. That the Property Management Company authorized to receive Water & Wastewater Bills and Notices is also appointed by me (us) with respect to granting the Region access to the property for any purposes relating to the provision of water and wastewater services.
3. That I (we) will promptly notify the Region of any change, including changes to ownership (including owner mailing address), tenancy or Property Management Company.
4. That the Region can cancel this Authorization for any reason and at any time.

\_\_\_\_\_  
Owner's Signature

\_\_\_\_\_  
Print Name

\_\_\_\_\_  
Date

### Property Management Company

I (We), \_\_\_\_\_ have authority to act on behalf of the Property Management Company and agree to the following:

1. I (We) are acting on behalf of the owner in relation to receiving, and paying bills and notices for the above noted service address.
2. I (We) agree to grant access to the Region for the purposes of any reason related to the supply of water and wastewater to the service address.



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4. I (we) confirm that the above noted Property Management Company information provided by the owner of the service address is accurate, and consent to the method of collection of this personal information provided by the owner in this form.

\_\_\_\_\_  
Property Management Signature

\_\_\_\_\_  
Print Name

\_\_\_\_\_  
Date

Personal information collected is pursuant to the **Municipal Freedom of Information and Protection of Privacy Act**, as amended, under the authority of Part XII of the **Municipal Act**, as amended, and will be used for the purposes of administration of the municipal water and wastewater services. Questions about this collection should be directed to the attention of Accounts Receivable, Regional Municipality of Waterloo, 150 Frederick Street, Kitchener ON N2G 4J3.

Completed form should be sent by email to [arwater@regionofwaterloo.ca](mailto:arwater@regionofwaterloo.ca) or faxed to 519-575-4448 to the attention of Accounts Receivable.