BARGERSVILLE UTILITIES
P.O. Box 420 Office: 317-422-5115
Bargersville, IN 46106 Fax: 317-422-5117 or -3743
www.townofbargersville.org

RENTAL PROPERTY OWNER AGREEMENT

ALL INFORMATION MUST BE COMPLETED

Date:_____

Please type or print:

I am _____ the owner of the property located at
(Property Owner's Name)

_____
(Property Address)

_____
(Lot #) (Subdivision Name)

When renters move out:

- ❑ Always leave utilities on in my name
- ❑ Always turn utilities off
- ❑ Leave electric on in winter
- ❑ Leave water on in winter

I am aware that as the property owner, it is my responsibility to make sure that **any** renter transfers this service into or out of their name(s) upon moving in and out. Unless this is done, it will be our financial responsibility for any utility usage at this address.

Property Owner's Name:_____
Address:_____

_____

Phone #:_____ Tax ID # / S.S. #:_____

Company Representative(s):_____

By signing below, I verify that the above information is correct to the best of my knowledge and agree that, if I am a customer of Greenwood Sanitation, this application and/or information contained herein may be shared with the City of Greenwood:

_____ _____
Signature of Owner(s) Date Signature of Owner(s) Date

Thank you.

_____
(Signature of Bargersville Utilities Representative)

Note: *Information on your Rights and Responsibilities are available online at http://www.townofbargersville.org/Utility_Forms.htm and clicking on the Rights and Responsibilities pamphlet link, and/or upon request.*

OFFICE USE ONLY

Account Number:_____ Receipt Number:_____
Check Number:_____ Amount:_____ Cash: ❑ Received by:_____

Rights/Responsibilities ❑ Ordinance ❑ ACH Form ❑ Check Valve ❑ Lead Letter ❑ Call Before Dig ❑
Water Info Pamphlet ❑ Date_____ Completed by_____