City of Canal Fulton Utilities Affidavit of Property Owner

Account Number:_____

I,______do hereby state that:

1. I am the legal title holder (owner) of property/properties located in the City of Canal Fulton and/or served by the City of Canal Fulton Utilities. The following address(es) pertain to this affidavit:

2. I hereby authorize , who is residing at the address noted above, to serve as my agent for the specific and limited purpose of receiving billing notices issued by the City of Canal Fulton Utilities.

3. I further authorize the above-named agent to make payment on my behalf in a prompt and timely manner and according to the rules and regulations of the City of Canal Fulton Utilities.

4. I acknowledged and agree that I am responsible for assuring that I have provided the City of Canal Fulton Utilities, a complete, accurate and current address for my designated agent.

5. I further acknowledge and agree that as the property owner, I am ultimately responsible for payment of any unpaid charges and complete compliance with the payment obligations. I further acknowledge that I am responsible for payment despite any agreement that I may have with the tenant, vendee or other third party, and that any past du;e delinquent balances may be certified to the Stark County Auditor to be placed on my property truces.

Property Owner Signature

Phone Number

Email

Owner Mailing Address

Date