LEHIGH COUNTY AUTHORITY

Allentown Water / Sewer Service (city accounts only)

1300 Martin Luther King Dr.
Allentown PA 18102
610-437-7515
610-841-1994 (fax)
cityservice@lehighcountyauthority.org

Suburban Areas (non-city accounts)

1053 Spruce Road, PO Box 3210

Allentown, PA 18106

610-398-1444 610-398-8413 (fax)

service@lehighcountyauthority.org

Owner & Tenant Authorization to Invoice for Metered Water and Sanitary Sewer Service

This Authorization is valid for 90 days. If all terms are not met within 90 days, a new Authorization will be required.

NOTE: Outstanding water and/or sewer balances must be paid <u>in full</u> prior to LCA completing this requested change. LCA has the right to suspend the privilege of transferring an account into a tenants(s) name if balances are not paid in a timely manner.

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				BALANCE		
SERVICE ADDRESS		TENANT MOVE IN DATE	ACCOUNT NO.	AS OF DATE	AMOUNT	
OWNER INFORMATION (All fields are required to be completed)						
I (we) acknowledge that Lehigh County Authority (LCA) provides water and/or sewer service to a premises only at the owner's request, and that I (we) as owner(s), remain ultimately responsible for paying the cost for LCA-provided water and sewer services. I (we) request and authorize LCA to send all bills for LCA-provided water and sewer services for the service address to the tenant listed below. I (we) understand that I (we) remain primarily responsible for payment of bills at all times. In addition, I (we) will be responsible for paying any outstanding water and sewer charges for LCA service through the date of this change. Any time a tenant moves in or out, a \$15 service initiation fee will be billed to the new billable customer (tenant or owner), and I (we) agree to be responsible for such charges. Any credits that remain on my LCA water/sewer account for this property following this transaction will remain on the account for future use in offsetting any unpaid tenant LCA water/sewer bills for this property that may accrue unless refund is requested by me in writing. I (we) understand all final bill balances must be paid by check, cash, or money order.						
Owner(s) Name (print):						
				Date:	Date:	
Owner(s) Signature(s):				Date.		
Mailing Address:				Phone:		
Email:						
TENANT INFORMATION						
I (we), as tenant(s), acknowledge that I (we) will be billed directly for LCA water and/or sewer services for the service address, and a \$15 service initiation fee will apply to my first bill for service.						
Tenant(s) Name (print):						
				Date:		
Tenant(s) Signature(s):						
Mailing Address:				Phone:		
LCA Internal Checklist:						
Collections Department: Transfer Approved Transfer Not Approved Notes:						
Settlement Reading WO#: Create Pending: Tenant Service St				ce Start Date:		