Mason County P.U.D. #1 Rental Standby Agreement

"**Rental Standby**" **Definition:** Rental standby accounts are established at the request of the property owner or property manager for the purpose of keeping the power connected and in the owner's or property manager's name during the times that the residence is not being rented.

If you wish to establish a rental standby account, please read the agreement below. List all service addresses and account numbers that you wish to establish as rental standby accounts or any that you wish to remove. Please specify if you are establishing or removing. It is advisable that you keep a copy of this agreement for your records. Also, for your own protection, we suggest that you request that your renter obtain a copy of our Work Request when he/she establishes the service in their name – before you provide the renter with a key to move into the residence. The Work Request will verify that the account will be transferred from your name to the new renter and the date this will occur.

Agreement: I hereby request and authorize PUD 1 to maintain an account in my name at each of the following locations owned/managed by me. I also authorize PUD 1 to leave the service active in my name during any and all interim periods between termination of service by one tenant and establishment of service by another tenant.

I, ______, **agree to pay** for all billings incurred during each interim period at each location at the applicable rate schedule, including the set-up fee.

If I wish to add or remove any locations under this agreement, I agree to make such requests on forms provided by PUD 1. I also agree to notify PUD 1 to remove the rental standby agreement from my name if there is a change in ownership or property management firm. I understand if I neglect to do so, the billings incurred are my responsibility.

I,,v		wish to remove the rental standby agreement for each	
location(s) listed below.			
Establish/	SERVICE LOCATION	LOCATION POLE #	
Establish/ Or Remove			
Establish/ Or Remove			
(Owner's Name – print)			
(Address)			
(City, State & Zip)			
(Phone No.)			
	ERS ALL BILLING WII Y OF THE PERSON WH		

SIGNED THIS AGREEMENT

If property(s) are to be handled by a Property Management Co., complete the following:

(Name of Company & C	Contact Person)	
(Billing address)		
(City, State & Zip)		
(Phone No.)		
If there are additional ad	dresses complete the following:	
(Circle one)	SERVICE LOCATION	LOCATION POLE #
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Or Remove		
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Customer ID#	Keyed By	