

ACWWA



Arapahoe County Water and Wastewater Authority

13031 East Caley Avenue, Centennial, CO 80111, (303) 790-4830, FAX (303) 790-9364
www.arapahoewater.org

ACCOUNT AUTHORIZATION LETTER
TO OWNER REGARDING DESIGNEES AND OCCUPANTS

Dear ACWWA Customer:

In order to protect the privacy of our customers Arapahoe County Water and Wastewater Authority (ACWWA) only releases account information to the owner of the property, the designee of a Property Management Company authorized by the owner of the property, or to a designee appointed as a proxy for an active member of the Military.

ACWWA's customers are defined as the owner of the property and all fees are the responsibility of the property owner. ACWWA assumes no responsibility for agreements between owners and occupants, or vendors and vendees and will not release account information to occupants, or vendors and vendees.

The owner of the property may authorize ACWWA to send a duplicate of the monthly invoice to designees or occupants by mail for a fee. In all instances, however, the owner of the property remains ultimately liable for such charges and ACWWA staff will only discuss the account and/or release information about the account to the owner or authorized designee. The option to mail a duplicate invoice and notices to designees or occupants will not replace the owner's invoice but will be in addition to the owner's invoice.

When a condominium association governs a number of units receiving service from ACWWA through one meter, the condominium association is considered the customer of ACWWA and the condominium association shall receive a single bill for all units serviced by ACWWA. In no event shall ACWWA be obligated to bill the owners of individual units within a condominium unless service to each unit is metered separately.

Respectfully,
ACWWA Billing Department

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ACCOUNT AUTHORIZATION FORM

ACCOUNT: _____ DATE: _____

OWNER NAME: _____

BILLING ADDRESS: _____

SERVICE ADDRESS: _____
STREET CITY STATE ZIP

PHONE: () _____ - _____ E-MAIL _____

I WOULD LIKE TO RECEIVE AN INVOICE VIA: ☐ EMAIL ☐ MAIL ☐ BOTH

I, _____, give ACWWA authorization to provide the Person/Company listed below
the following item(s) concerning my account (Check all that apply):

☐ Balance and Charges ☐ Online Access ☐ Mail Invoice (Duplicate bill fee applies) ☐ Email "E-Invoice" (No fee)

NAME / COMPANY: _____ RELATIONSHIP _____

ADDRESS: _____
STREET CITY STATE ZIP

PHONE: () _____ - _____ E-MAIL: _____

☐ PLEASE REMOVE _____ FROM THE PROPERTY LISTED ABOVE.

PREVIOUSLY AUTHORIZED PERSON/COMPANY

THE OWNER OF THE PROPERTY REMAINS ULTIMATELY LIABLE FOR SUCH CHARGES STATED IN SECTION 6.4.4 OF ACWWA's RULES AND REGULATIONS.

Owner Signature

Date

Owner Printed Name