



# EL OSO WATER SUPPLY CORPORATION

4098 South Hwy 181  
Kenedy, TX 78119  
830-583-3543  
Fax: 830-583-3550  
www.elosowater.com

## RENTER'S BILLING AGREEMENT

### RENTER INFORMATION

Renter(s) Name (Please Print)		Date
Renter's Mailing Address		City, State, Zip Code
Renter's Telephone Number	E-Mail Address	
Service/Location Addresss (Location Number)		

### LANDLORD INFORMATION

Landlord/Member's Name	Member's Account Number	
Member's Address		Member's Telephone

### RENTER AGREEMENT

As the Renter(s), I (we) agree to make the monthly payments for the water usage during the duration of my (our) renting/leasing time.

I (we) are aware that once our lease agreement is up, it is our responsibility to inform El Oso Water Supply Corporation so that a final bill can be issued. If not promptly notified, I (we) will remain responsible for any unpaid water usage.

### RENTER(S)/LESSEE(S) SIGNATURE AUTHORIZATION

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Date of Signature

The following information is requested by the Federal Government in order to monitor compliance with Federal Laws prohibiting discrimination against individuals seeking to participate in this program. You are not required to furnish this information, but are encouraged to do so. This information will not be used in evaluating your application or to discriminate against you in any way. However, if you choose not to furnish it, we are required to note the race/national origin of individuals on the basis of visual observation or surname.

- |  |  |  |
|--|--|--|
| <input type="checkbox"/> To Opt Out Check Here | <input type="checkbox"/> White, Not of Hispanic Origin     | <input type="checkbox"/> Asian or Pacific Islander |
| <input type="checkbox"/> Male                  | <input type="checkbox"/> Black, Not of Hispanic Origin     | <input type="checkbox"/> Hispanic                  |
| <input type="checkbox"/> Female                | <input type="checkbox"/> American Indian or Alaskan Native | <input type="checkbox"/> Other (Specify)           |

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