

Trash & Recycling Services Affidavit Between Property Owner and Tenant

TOWN OF TOWNSEND

141 Main Street, P.O. BOX 223, TOWNSEND, DE 19734

PHONE: 302-378-8082 • FAX: 302-378-7099 • WWW.TOWNSEND.DELAWARE.ORG

Parcel # _____ Property Address _____ Effective Date _____

Reason for Change: New Tenant New Property Management Company Other

Owner Authorization for Mailing Address Change to Second Party

The Town of Townsend has received your request to change the billing name and address on the trash and recycling account at the service address referenced above.

Under Section 46-26 of the Town Code, trash service within the incorporated town limits is mandatory for all property owners. The "Reason For Change" shall be applied to the trash and recycling account for the service address.

If you wish to change the information currently listed on your account to your tenant, property manager or other agent, please complete and return this form.

Property Owner Name _____ **Phone*** _____

Mailing Address _____ **Email** _____

I authorize a change of billing name and/or address for my trash and recycling account at the above service address. I understand, as the owner of the property, I am responsible for any unpaid fees including any late fees that have been assessed to the account.

I also understand it is my responsibility to notify the Town of Townsend of any future change in my mailing address.

Property Manager/Agent _____ **Phone*** _____

Mailing Address _____ **Email** _____

Property Manager/Agent Signature Date

Tenant Name _____ **Phone*** _____

Mailing Address _____ **Email** _____

Tenant Signature Date

Comments _____

X _____

Owner's Signature Date

*PHONE NUMBERS ARE REQUIRED FOR PROCESSING OF THIS REQUEST.

Return completed and signed form to The Town of Townsend, 141 Main Street, P. O. Box 223, Townsend, DE 19734. If you have any questions, call us at (302) 378-8082.