



**CITY OF FLINT  
DEPARTMENT OF FINANCE**

**Customer Service Center**

**Karen Weaver  
Mayor**

**Amanda Trujillo  
Deputy City  
Treasurer**

Date: \_\_\_\_\_

I, \_\_\_\_\_, authorize \_\_\_\_\_, to act  
(Name) (Agent)

as my agent in obtaining water service at: \_\_\_\_\_  
(Service Address)

Signed: \_\_\_\_\_  
(Property Owner)

Notarized by: \_\_\_\_\_

My commission expires: \_\_\_\_\_

**§ 46-48 WATER SERVICE PLACED IN NAME OF PROPERTY OWNER OF RECORD; EXCEPTION.**

(a) Effective June 1, 1986 or as soon thereafter as practicable, water service shall only be placed in the name of the property owner of record. Duplicate bills may also be sent to the service address if requested in writing by the property owner.

If you have any questions, feel free to contact the Customer Service Center by calling phone number of (810) 766-7015.

C:\Water Agent Form 2016

**FOR OFFICE USE:**

Account #: \_\_\_\_\_

Account #: \_\_\_\_\_

Account #: \_\_\_\_\_

Account #: \_\_\_\_\_

Account #: \_\_\_\_\_

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