LETTER OF AUTHORIZATION FOR AGENT REPRESENTING PARCEL OWNER

Orange County Sanitation District Regional Sewer User Fee

	Parcel Owner's Name (s)		
	Mailing Address	<u> </u>	
		Tel. No	
	Parcel Number (s)		
	roll in accordance with OC San Ordinances. I	San) collects sanitary sewer service charges on the property to Parcel owners have the right to communicate directly with the C on their parcels or they may authorize an agent to represent ther	
	The owner(s) have elected to authorize the agent named below to act on our behalf as Agent in matters relating to the OC San service charge placed on the property tax bill for those parcels owned by the undersigned listed above. The Agent has full permission to act on the Owner's behalf in connection with all matter pertaining to the service charge for any listed parcels, and OC San is authorized to release any information relating to the listed parcels' service charge to the designated Agent.		
	Agent Name		
	Address		
	Tel. No	Email	
V .	charges on said parcels and make corrections accordingly. Corrections made by OC San may decrease increase service charges. This Authorization expires automatically one year from date of execution below. The Authorization may be revoked prior to the indicated term by a certified letter signed by the parcel ow		
	a partner, a corporate officer or other authorized person. Such revocation shall become effective wh received by OC San.		
	By executing this form, we are also authorizing OC San to access our water consumption information from water service provider.		
1.	I declare under penalty of perjury under the laws of the State of California that the information provided on application is true and correct in all respects and that I am the Owner or am authorized to sign this letter authorization of behalf of the Owner.		
		Company Name	
ſ	Print Name	Company Name	
	Print Name		

This form MUST be notarized

The information provided is subject to verification with the parcel owner.

ORIGINAL SIGNATURE OR CERTIFIED ELECTRONIC SIGNATURE REQUIRED

REVISED JUNE 2024

State of			
County of			
On	, before me,	, Notary Public,	personally
appeared			
within instrument and acknow and that by his/her/their sign acted, executed the instrume	sis of satisfactory evidence to be the poledged to me that he/she/they executed ature(s) on the instrument the person(s) ent. PERJURY under the laws of State of C	the same in his/her/their authorize), or the entity upon behalf of whic	ed capacity(ies), th the person(s)
	WITNESS my hand	l and official seal.	
PLACE NOTARY SEAL ABOVE	SIGNATURE		

A Notary Public or other officer completing this certificate verifies only the identity of the individual who signed the document to which this certificate is attached, and not the truthfulness, accuracy, or validity of that document.

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