UTILITY SERVICES OF ALASKA, INC.

PROVIDING ADMINISTRATIVE SERVICES TO
COLLEGE UTILITIES CORP. AND GOLDEN HEART UTILITIES, INC.

Authorized Agent Form

Property Street Address: _____

Please check the box that applies to the status of the property:

☐ Owner Occupied ☐ Tenant Occupied ☐ Vacant

Please check property classification:

☐ Single Family Residence ☐ Duplex ☐ Multi-Family ☐ Commercial ☐ Other

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The State of Alaska requires any person managing property, which is not a direct employee of the owner of the said property, to be licensed and bonded for the purpose of establishing responsibility and accountability on behalf of the owner(s), and on behalf of any other entity involved.

Authorized Agent: _____

Mailing Address: _____ Phone Number: _____

_____ Fax Number: _____

Signature: _____ Date: _____

Print Name As Signed Above: _____

I am requesting that the utility billing statements be rendered to my authorized agent listed above. Any contact involving the sewer and water services to this property should be directed to my authorized agent. It is also my authorized agent's responsibility to notify CUC/GHU of any billing changes. I am fully aware that I will pay for all delinquent charges if the renter or the authorized agent does not pay.

Property Owner(s): _____

Mailing Address: _____ Phone Number: _____

_____ Fax Number: _____

Signature: _____ Date: _____

Printed Name As Signed Above: _____

(Office Use Only)

Account No.: _____

Employee's Initials: _____ Date: _____

Please return to: Utility Services of Alaska, Inc.
P.O. Box 80370
Fairbanks, AK 99708-0370

Phone: (907) 479-3118
Fax: (907) 474-0619

Revised February 2006