

**TRIDELL-LAPOINT
WATER IMPROVEMENT DISTRICT**

P.O. Box 760061
Tridell, Utah 84076-0061
435-247-2475
FAX-435-247-2475

Account# _____

TO WHOM IT MAY CONCERN:

I (owner) _____ do hereby give permission for (name of renter) _____ to have access to water connection # _____ owned by me (us) of the Tridell-LaPoint Water Improvement District (TLWID) located and attached to the following described tract of land/physical address:

I (we) understand that any bills from TLWID which remain unpaid by the renter will be the responsibility of the property/connection owner.

I (we) hereby request that the rental/access of said connection be made forthwith and shown upon the records of the District.

DATED this _____ day of _____, 20_____.

Owner(s) _____

New Renter(s) _____

Address _____

City, State, Zip _____

Phone _____

Approved by TLWID _____ Date Approved by TLWID _____