

**OCEANO COMMUNITY SERVICES DISTRICT**

1655 FRONT STREET/ PO BOX 599

OCEANO, CA 93475-0599

TELEPHONE: 805-481-6730

FAX: 805-481-6836

[www.oceanocsd.org](http://www.oceanocsd.org)

**UTILITY BILLING – REQUEST /MODIFICATION FOR ELECTRONIC BILLING (E-BILL)**

This is a request to enroll in or modify a current electronic billing enrollment between the Oceano Community Services District (District) and the Property Owner or authorized Tenant.

New Request

Modification

Owner Account

Tenant Account

Name on Account: \_\_\_\_\_

Service Address: \_\_\_\_\_

OCSD Account Number: \_\_\_\_\_

I would like to receive an EMAIL ONLY copy of my bi-monthly utility bill.

Email address to be used: \_\_\_\_\_

I would like to receive an EMAIL and PAPER copy of my bi-monthly utility bill.

I would like the email address on file to be changed to:

\_\_\_\_\_

\_\_\_\_\_ I understand that the District is not responsible for electronic bills not received, sent to spam folders or bounced back to the sender. It is my responsibility to complete a new form in a timely manner if my information has changed.

\_\_\_\_\_ Late or non-delivery of bills does not change the utility billing and payment policies. If you do not receive your bill, please contact the District at (805) 481-6730.

\_\_\_\_\_ Only original billing and late notices will be sent electronically. Accounts past due and facing possible disconnection will receive a physical notice (door hanger) on their property. It is the sole responsibility of the property owner or tenant account applicant to keep their account current and connected.

\_\_\_\_\_ I understand and acknowledge that modification of an electronic billing request previously submitted must be received by the 20<sup>th</sup> of the month prior to the mailing of the next regular billing cycle to go into effect.

Signature

Date

OFFICE USE ONLY:

OCSD Account Number \_\_\_\_\_

Processed \_\_\_\_\_

Date Entered

Initials