



General Manager
Hilltops Council
Locked Bag 5
YOUNG NSW 2594
Phone: 63801 200
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Fax: 63801 299
Email: mail@hilltops.nsw.gov.au

Real Estate Authorities for Water Consumption

Date: ____/____/____

Dear Sir

RE: WATER CONSUMPTION ACCOUNT _____

NO: PROPERTY: _____

As owner (s) of the above mentioned property/properties, I/We authorise Hilltops Council to forward the quarterly water consumption account(s) to our managing agent(s) and or tenant(s).

Signature Signature

Print Name:..... Print Name:.....

Address:.....

Contact No:..... Contact No:.....

As owner (s) of the above mentioned property/properties, I/We authorise our Managing Agents to access all information in regards to the water consumption account(s) relating to the above property.

Signature Signature

OFFICE USE ONLY
Accepting Officer Signature:
Date:.....