



For Office Use Only
Account Number

TOWN OF MILLIKEN RENTAL BILLING AUTHORIZATION FORM

I/We, the undersigned, am/are the owner(s) of:

Rental Address _____ City Milliken State CO Zip 80543

I/We understand that pursuant to Section 13-2-540 for Property Rental Accounts and Section 13-2-550 for Duplicate Utility Statement Charge of the Milliken Municipal Code, the Town of Milliken will send utility bills to me/us as the owner(s) of this property. I/We further understand that I am/we are ultimately responsible for the utility payment and all associated costs. If these utility payments are not paid on time, the utilities may be turned off, and the Town may also file a lien on this property.

I/We hereby authorize the Town of Milliken on my/our behalf to also mail a copy of my/our utility bill, at an additional cost of \$2.00 per month, to any Renter living at the address listed above.

I/We will notify the Town of Milliken if I/we decide to use a Property Manager and complete the necessary form.

Owner Name(s)			
Mailing Address	City	State	Zip
Phone #	Additional #		
Email Address			

Owner Signature _____ **Date** _____

Addl. Signature _____

Return in person:
Milliken Town Hall
Front Desk or
Drop-box outside
1101 Broad St

Mail to:
Town of Milliken
Attn: Utility Billing
PO Box 290
Milliken CO 80543

Fax to:
(970) 587-2678
Attn: Utility Billing

Email to:
mmontoya@millikenco.gov

Questions? Call:
(970) 587-4331

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Date Rec'd: _____	Billing Contact Info Updated? <input type="checkbox"/>	Notes Added to Account? <input type="checkbox"/>	
Paperless Billing NOT active? <input type="checkbox"/>	Water/Sewer Services Verified? <input type="checkbox"/>	Shadow Billing ACTIVE ? <input type="checkbox"/>	
<i>Last updated: 07/2019</i>	Date Entered: _____	Entered By: _____	