



Utilities Department, 1220 Sweetwater Road, Incline Village, NV 89451-9214
Telephone # 775-832-1203, then 2, Fax # 775-832-1260

Please Fill Out This Form and Return to IVGID
---DESIGNATION OF AGENT---

As the owner of _____, IVGID Utility Account number _____, I am hereby requesting that the billing for utility service and account correspondence from the Incline /Village General Improvement District for this property be sent to me in care of my authorized agent as follows:

Agent's Name

Agent's Mailing Address

City

State

Zip Code

Agent's Phone Number

I acknowledge that by this designation, I am not waiving the District's right to collect for service from me as the owner of the property served and that I am fully responsible for any charges not otherwise paid. I understand that all invoices, delinquency notices, shut off notices, inspection notices, and other correspondence will be sent to my agent's mailing address.

Owners Signature

Date of Request

Print Owner's Name

Owner's Mailing Address

City

State

Zip Code

Owner's Phone Number