

## SAN JOSÉ MUNICIPAL WATER THIRD PARTY NOTIFICATION AUTHORIZATION FORM

## **INSTRUCTIONS**

Customers must complete this Third Party Notification Form if they wish to designate a third party to remind them of overdue utility bills that may result in disconnection of service. This designation does not require the third party to pay the customer's bill.

Third party notification does not change the customer's obligation to pay nor does it prevent or delay the termination of water service.

| CUSTOMER INFORMATION (Complete each item in this section) |                                     |                         |                    |      |  |
|-----------------------------------------------------------|-------------------------------------|-------------------------|--------------------|------|--|
| Name                                                      | Email                               |                         | Daytime Phone      | Date |  |
| Service Address                                           |                                     |                         |                    |      |  |
| Mailing Address (if different than se                     | ervice address)                     |                         |                    |      |  |
| Customer Number                                           |                                     | Account Number          |                    |      |  |
|                                                           |                                     |                         |                    |      |  |
| THIRD PARTY INFORMATION (Com                              | plete each item in this se          | ection)                 |                    |      |  |
| Name                                                      | Email                               |                         | Daytime Phone      | Date |  |
| Mailing Address                                           |                                     |                         |                    |      |  |
| Relationship to Customer                                  |                                     |                         |                    |      |  |
|                                                           |                                     |                         |                    |      |  |
| Signature of Customer                                     |                                     |                         |                    |      |  |
| Signature of Third Party                                  |                                     |                         |                    |      |  |
|                                                           |                                     |                         |                    |      |  |
| Please email or send this form to the                     | he address below.                   |                         |                    |      |  |
|                                                           |                                     |                         |                    |      |  |
| Email - SJFinanceUtilities@sanjose                        | ca.gov                              |                         |                    |      |  |
| San José City Hall - Customer Call C                      | enter, 11 <sup>th</sup> Floor 200 I | East Santa Clara Street | San José, CA 95113 |      |  |