

Waterworks District No 2, Parish of Beauregard

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Release of Customer Information Authorization Form

PURPOSE: This Release of Customer Information Authorization Form allows a Waterworks District No. 2, Parish of Beauregard utility account holder ("Account Holder") to delegate certain rights to an authorized party ("Authorized Party") concerning account holder's service(s), including authorizing receipt of confidential customer account information. This form must be completed in its entirety and signed by the Account Holder (s).

AUTHORIZATION: I, _____ (printed name), state that I am the utility services Account Holder and hereby request and authorize the Waterworks District No. 2, Parish of Beauregard to release my utility customer account information to, and allowed to make decision on my utility account.

The Account Holder must supply a valid photo identification (driver's license) if form is emailed, mailed or brought in by the authorized party. The Authorized Party must provide 2 forms of state/federal identification.

Authorized Party: _____,

Address: _____,

Phone Number: _____ Email: _____,

The scope of my access to my account information is authorized as follows:

_____ **Limited Access**

Authorized Party may do the following: (check any or all that apply)

___ Usage and Financial Information Only

___ Usage Only

___ Financial Information Only

_____ **Full Access**

Authorized Party may conduct any transactions and receive any information regarding my utility account.

This authorization is valid for: (Account Holder must initial)

___ One-time only: Authorized Party is granted access one time.

___ One year period: Authorized Party is granted access for twelve months from the date of execution.

___ Date specific: Authorized Party is granted access until _____ (date).

___ Account closes: Authorized Party is granted access until the utility account is closed.

I understand that this Authorization does not require the Waterworks District No. 2, Parish of Beauregard to release information, and the Waterworks District No. 2 retains the right to verify any authorization submitted before releasing information or taking any action.

I hereby release and hold harmless, and indemnify the Waterworks District No.,2 Parish of Beauregard from any liability, claims, demands, and causes of action, damages, or expenses resulting from:

- 1) any release of information pursuant to this Authorization*
- 2) the unauthorized use of this information by the Authorize Party; and*
- 3) any actions taken by the Authorized Party pursuant to this Authorization*

I understand that I may cancel this Authorization at any time by notifying the Waterworks District No. 2, Parish of Beauregard in WRITING.

Account Holder's Signature _____ Date _____

Account Holder's Printed Name _____

Account Holder's Identification: (One photo identification must be attached)
Driver's License # _____

Account Holder's Telephone Number: _____

Authorized Party's Signature _____ Date _____

Authorized Party's Printed Name _____

Authorized Party's Telephone Number _____

Authorized Party's Identification (2 forms of photo identification must be attached)

Driver's License Photo ID# _____

Secondary Identification must be attached:

Social Security Card: _____

And/or any State/Federal Issued Identification Card: _____

Utility Service Address _____

Utility Service Account Number: _____