

439 WATER SUPPLY CORPORATION

GRANT

MEMBER/OWNER'S AUTHORIZATION TO APPOINT AGENT

I, the member/owner/agent identified by the signature below, hereby **GRANT** 439 Water Supply Corporation the authority to conduct all business regarding my membership/meter with the agent whose name I have affixed below. The named agent will have full authority for all decisions regarding water service at the meter number and address so indicated. By my signature below I signify my understanding that:

- 439 Water Supply Corporation **does not** collect a deposit from renters or agents. The corporation strongly recommends that member/owner/agent collect a deposit for his/her own protection.
- All charges stay with the meter (not the user) and the member/owner is ultimately responsible for all charges against this meter, whether incurred by the member/owner/agent or a renter. **Any charges that remain unpaid are the responsibility of the member/owner. 439 Water Supply is not responsible for notifying member or agent of renter's unpaid bills. Member or agent may call the office (254-933-2133) at any time to check on the status of renter's payments on the account.**
- 439 Water Supply Corporation will continue to recognize the authority granted the named agent for this meter until such time as the member/owner furnishes written instructions (on the form specified by 439 Water Supply Corporation) to revoke the appointment of this agent.**
- 439 Water Supply Corporation will send all bills for this meter to the named agent until alternate appropriate forms are completed by member/owner/agent.
- 439 Water Supply Corporation does not provide interim meter readings when an agent's power has been either granted or revoked. Meters are read once-per-month and bills are mailed to the authorized person of record on the account at that time.

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| Meter #: _____ Date: _____ |
| 911 Address of the Property: _____ |

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| Agent's Name: _____ |
| Agent's Mailing Address: _____ |
| Agent's City/State/Zip: _____ |
| Agent's Telephone # _____ |

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|---------------------------------------|
| Member/Owner's Signature: _____ |
| Member/Owner's Mailing Address: _____ |
| Member/Owner's City/State/Zip: _____ |
| Member/Owner's Telephone # _____ |

"439 Water Supply Corporation is an Equal Opportunity Provider and Employer"
If you wish to file a civil Rights Program complaint of discrimination, complete the USDA Program Discrimination Complaint Form (PDF), found online at http://www.ascr.usda.gov/complaint_filing_cust.html, or at any USDA office, or call (866) 632-9992 to request the form. You may also write a letter containing all of the information requested in the form. Send your completed complaint form or letter to us by mail at U.S. Department of Agriculture, Director, Office of Adjudication, 1400 Independence Avenue, S.W., Washington, D.C. 20250-9410, by fax (202) 690-7442 or email at program.intake@usda.gov.