

Consent for Release of Residential Customer Information

10: Fo	ountain Utilities		
I, hereby a	(print name), in accordanthorize Fountain Utilities to release information re	dance with Ordinance No.1669 (Utility Code),do garding my Customer Service Account to:	
	NAME:		
	ADDRESS:		
	CONTACT INFO:		
	release the following information with regard to :	electric, water, and/or wastewater for my Fountain	
	☐ Utility Bills☐ Payment Record☐ Other (specify)		
	The state of the s	the date of my signature until	
and that	tt the information will be handled confidentially in con	npliance with all applicable federal laws.	
	y release and discharge Fountain Utilities, as well as in Utilities might otherwise incur as a result of the rel	the City of Fountain, from all claims and liabilities, which ease of information hereunder.	
I certify	that I am the individual whose name appears on the	account.	
Accour	nt holder signature:	Date:	
Addres	ss:	Phone No	

Please fax or email your request to Fountain Utilities at 719-322-2011 or CustomerService@fountaincolorado.org