

RELEASE OF CUSTOMER RECORDS FORM

Customer Information	
Customer's Name:	PRINT name exactly as it appears on the water bill.
Service Address(s):	
Account Number(s):	
Phone Number:	
E-Mail Address:	
Description of Records Authorized for Release	
Check ALL that apply.	
□ Water Bill(s)	Other (Specify)
☐ Water Consumption F	listory
Authorization Period	
This authorization is valid for a period of one year from the date this form is executed. A new form must be resubmitted to Mesa Water District by the Agent for each request.	
Authorized Signer/Sign	ature
the Customer, your nam	if you are the Customer (name as it appears on the water bill). If you are not nee must be listed as the contact person on the account OR you must have sign on behalf of the Customer. Proof of authority is required.
Print Name:	Title:
If your name is o	lifferent from the Customer's name above.
I authorize the Third-Party Agent listed below to request records from Mesa Water District on my behalf.	
	Signature Date
Third-Party Agent	
Person/Company:	