Additional Information

Date:	
Acc	ount Number:
Nan	ne on Account:
l au	thorize Duncan Public Utility Authority (DPUA) to add
	to my account. By signing this form, I give
	permission to access the following rmation on my account and make the following changes:
[]	Change phone number
[]	Change mailing address
[]	Transfer Service
[]	Disconnect Service
[]	Request an extension or payment agreement.
[]	General Inquiry
[]	Setup bank draft
[]	Setup average billing
[]	Accept refund check
[]	All of the above
By s	signing this I agree that the above mentioned person(s) are
	norized to access and make the selected changes to my account. I
	e responsibility to notify DPUA to remove or edit any privileges
give	en to the additional person on the account.
X	X