



## Senior Citizen or Dependent Adult Request for Third Party Notification. We're Here to Help...

Some of our senior citizen or dependent adult customers have told us that they occasionally lose track of their water bill. We understand, and have a special program to assist. The Third Party Notification Plan can help you avoid possible termination of service for non-payment. Under this plan, you choose a person or organization as your designated "third party." This can be a friend, relative, minister, social agency or civic organization who can help you keep track of water service payments.

### How it Works...

If your account is delinquent and your service may be discontinued, we will let your third party know about the situation. While they are not legally responsible for paying your bill, they can help make arrangements for payment. We will try in good faith to notify your third party about any delinquency on your account; however, we cannot be held liable if we do not contact them. If we are unable to reach the party, or if they are unwilling to arrange for payment, you will remain responsible for paying the bill. Notifying a third party about your account status does not obligate them to prevent your service from being terminated; therefore, choose a third party who is responsible and who will help you when you have a problem.

Our top priority is to provide high quality water and service to all of our customers. If you think the **Third Party Notification Plan** can help you, please complete the form below to register. If you have any questions, call us at **(415) 551-3000**.

### Third Party Notification Registration Form

If you'd like to take advantage of this Third Party Notification, please complete the form below. Mail the form to the **San Francisco Water Department, Customer Service, 525 Golden Gate Avenue, San Francisco, CA 94102**. Please note that both parties involved must sign the form. All information provided is held confidential.

**Check Status:**  **Senior Citizen**  **Dependent Adult**

#### Customer

Customer's Name (Please Print)

\_\_\_\_\_

Mailing Address \_\_\_\_\_

City, State, Zip \_\_\_\_\_

Account Number \_\_\_\_\_

Service Address (if Different from Mailing Address)

\_\_\_\_\_

Phone Number (please include area code)

\_\_\_\_\_

Email Address \_\_\_\_\_

Customer's Signature

\_\_\_\_\_

Date \_\_\_\_\_

#### Third Party

Name of Third Party to be Notified (Please Print)

\_\_\_\_\_

Mailing Address \_\_\_\_\_

City, State, Zip \_\_\_\_\_

Phone Number (please include area code)

\_\_\_\_\_

Email Address \_\_\_\_\_

Third Party's Signature

\_\_\_\_\_

Date \_\_\_\_\_

