

BOARD OF PUBLIC WORKS

CITY OF AUBURN, NE
ELECTRIC, WATER & WASTEWATER SERVICES

AUTHORIZATION TO RELEASE ACCOUNT INFORMATION

This request and authorization applies to Account Numbers(s):

I _____ request and authorize the Auburn Board of Public Works (BPW) to release my account history and or balance information by mail, phone or fax to the following person(s) or organization(s):

Address: _____ City: _____ State: _____ Zip Code: _____

Address: _____ City: _____ State: _____ Zip Code: _____

Address: _____ City: _____ State: _____ Zip Code: _____

I authorize the release of my account information, to the person(s) or organization(s) listed above. This authorization will remain in effect until which time it is revoked by me or the account is closed.

Account Holder Signature: _____ Date: _____