

To the Customer Service Team at Water Plus

I hereby authorise

Authorised person's full address

Postcode

Contact number

Contact Email

To receive information and give instruction on my/our behalf regarding account number(s)

Please tick the level of authority you wish to give in each section applicable:

• Level 1 – Authorise the Agent to:

- Request and receive current and historical account information for all my sites including –consumption history, meter numbers and contract end dates.
- Request and receive bill, payment and debt information.
- Authorise any adjustments, refunds, billing or changes to payment methods.
- Receive bills and arrange subsequent payment.
- Access to account information via MyAccount online portal.
- Submit meter reads on my behalf.
- Request and receive billing information.

• Level 2 – Authorises the Agent/Broker to do all matters covered by Level 1 above and:

- Issue a contract termination notice in relation to my/our existing [water] supply and/or sewerage services contract on my/our behalf.
- Requests and receive quote on my behalf
- Request and receive contracts on my behalf
- Agree contracts on my behalf

I have discussed how the Agent will be remunerated and I am aware of how the third party's fees are being paid.

This Letter of Authority shall remain valid for a period of 12 months from the original date of the signature, or for the length of any fixed term supply contract that you enter into. This will remain the case unless you advise otherwise.

By completing this form you are confirming the information you have provided is accurate and you are authorised to complete and submit this form.

Start date

Signature

Full name (Print)

Date