

## CONSENT AUTHORIZATION FORM

DATE: \_\_\_\_\_

§ 701.115 Protected personal information (PPI). (a) Access/disclosure. Access to and disclosure of PPI such as SSN, date of birth, home address, home telephone number, etc., must be strictly limited to individuals on the account.

PPI under Annual Identity Theft Prevention Program adopted in 2008 we will not be able to speak to you in regards to an account that is NOT in your name.

Please note, TNG Inc. will no longer allow anyone to have access to your account unless they are authorized to do so in writing by you, the account holder.

Please fill out, sign, date and return this form to TNG Inc immediately. Failure to do so will prevent personnel from entering your account for whatever reason, even if all they wish to do is pay your bill.

I, \_\_\_\_\_ would like to add \_\_\_\_\_,

To my TNG Utility Company Water Bill (what is relation to account holder ).

Please check the following boxes:

- a.  $\bigcirc$  I understand that we will be sharing the deposit on file.
- b. O When calling TNG, I understand I will need to identify myself with the last four digit of my Social Security number.
- c. O I understand that any person on this account they will have to identify themselves with the last four digit of their social security number.

| Account holder signature:  | Last 4 ss digit # |
|----------------------------|-------------------|
| Additional name signature: | Last 4 ss digit # |