



# Third Party Notification

The "third party" designated below will receive a copy of any delinquent notification sent, due to a past due balance owed on said account.

For accounts located in Oregon, a copy of the bill will be sent each month in addition to delinquent notifications.

All customers who are financially responsible listed on said account and the designated "third party" need to sign this form in order to activate the authorization.

The "third party" is not obligated to pay the customer's bill.

This authorization is in effect for all services provided under the account indicated until you notify Avista.

All required fields (\*) must be completed and printed legibly for this Third Party to be added to your account.

## Main Customer \*

Name- First, MI, Last *		Phone Number *	
Address *			
City *	State *	Zip *	
Main Customer Signature *		Date *	

## Co-tenant ( If financially responsible \* )

Name- First, MI, Last *		Phone Number *	
Co-tenant Signature *			
		Date *	

## Third Party \*

Third Party Name*		Phone Number *	
Address *			
City *	State *	Zip *	
Third Party Signature *		Date *	

We understand that situations can occur that interfere with the ability to pay your bill. If you foresee problems paying by the due date, please contact Avista Customer Service to discuss possible options.

Fax completed forms to 509-777-9506 or call us at 1-800-227-9187

Vist our website at [myavista.com](http://myavista.com)