Instructions for Third-Party Authorization

Dear California Resident:

Before we can fulfill an access or deletion request made by a third party on behalf of a California resident, the California Consumer Privacy Act (CCPA) requires American Water to obtain evidence that you authorize the third party to make the request on your behalf.

In order to authorize a third party to make a personal information access or deletion request on your behalf, please complete this Third-Party Authorization. Completing each line on the declaration with accurate information is required.

The following are the instructions for completion of the Third-Party Authorization form:

- **Lines 1** – fill in *your* name (this is for the person whose personal information is the subject of this request, i.e. the consumer).
- **Line 2** – fill in *your* service address (i.e. the place where you receive American Water services)
- **Line 4** – indicate whether *you* are a current or former customer.
- **Line 5** – fill in *your* email address for information or questions to you about this request.
- **Line 6** – fill in the third party’s name you are authorizing to make this request on your behalf (Authorized Third Party).
- **Line 7** – fill in the email address of the third party you are authorizing to make the request on your behalf.
- **Line 8** – insert the Case Number you received when submitting your request.
- **Line 9** – indicate which email address you request the report be sent to. You may only select one email address.
- You must sign the Declaration in front of a notary. The notary will ask for evidence of your identity in order to complete the attached Notary Acknowledgment.
- Once the Declaration and Notary Acknowledgment are complete, you can:
  - Upload it to the American Water Privacy Portal
  - Or mail the completed form to:

  American Water Works
  Attn: Enterprise Security
  1 Water St
  Camden, NJ 08102

- If we do not receive this signed and notarized Declaration (pages 2 and 3), we will not be able to complete your request and your request may be closed.
Third-Party Authorization Declaration

(1) California Consumer’s Name ______________________________________________

(2) Consumer’s Service Address ____________________________________________

(3) Consumer’s City, State, Zip _____________________________________________

(4) Consumer is a current or former customer: ☐ yes ☐ no

(5) Consumer’s email address for communications about this request

(6) Name of Person Authorized to Act on my behalf (Authorized Third Party)

(7) Authorized Third Party’s email address __________________________________

(8) Case Number _________________________________________________________

Dear American Water,

I am the individual named above in Line 1 and a resident of the State of California.

Please accept this notarized declaration authorizing the Authorized Third Party named above (in Line 6) to act as my representative in connection with my request to access or delete my personal information under the California Consumer Privacy Act of 2018, as amended.

Send my personal information to the email address above on:

(9) ☐ Line 5 (me) OR ☐ Line 7 (Authorized Third Party)

I certify under penalty of perjury under the laws of the State of California that the foregoing is true and correct.

Signature: ____________________________ Date: __________________

(Signature must be notarized)
Notary Acknowledgment

A notary public or other officer completing this certificate verifies only the identity of the individual who signed the document to which this certificate is attached, and not the truthfulness, accuracy, or validity of that document.

State of ________________________________
County of _______________________________

On ______________ before me, __________________________________ (name and title of officer), personally appeared ____________________________________________________________, who proved to me on the basis of satisfactory and legally sufficient evidence to be the person(s) whose name(s) is/are subscribed to the within Third-Party Authorization Declaration and acknowledged to me that he/she/they executed the same in his/her/their authorized capacity(ies), and that by his/her/their signature(s) on the instrument the person(s), or the entity upon behalf of which the person(s) acted, executed the instrument.

I certify under PENALTY OF PERJURY under the laws of the State of ________________________________ that the foregoing paragraph is true and correct.

WITNESS my hand and official seal.

Signature: ____________________________  Seal: __________________