MINNESOTA Cold Weather Rule

Know your rights and your responsibilities.



THIRD PARTY NOTIFICATION REQUEST

If you want a third party authorized to discuss your account with OPU on your behalf, and/or to be notified of a potential disconnection, please complete this form and return it to:

Owatonna Public Utilities 208 S. Walnut Ave. P.O. Box 800 Owatonna, Minnesota 55060

OPU will make every effort to send a copy of the Disconnection Notice to the party specified. The customer making this request understands OPU assumes no liability should the third party fail to receive and/or act upon the notification.

Customer Information:

Name	OPU Account Number
Service Address	Apt/Unit #
City, State, Zip	
Primary Phone	Secondary Phone
OPU has my permission to provide information to and accept information from the party named in this agreement:	
Customer Signature	e Date
Third Party Information:	
Name	
Mailing Address	Apt/Unit #
City, State, Zip	
Primary Phone	Secondary Phone
** Third Party Signa	ature Date

** - This request cannot be accepted without the Third Party's signature.