

**AUTHORIZATION FOR RELEASE OF  
ACCOUNT INFORMATION AND FOR REDISCLOSURE**

I, \_\_\_\_\_ (“Tenant”), authorize Southern Iowa Rural Water Association (“SIRWA”) whose address is 1391 190<sup>th</sup> Street, Creston, Iowa 50801-8299 to disclose and deliver to the owner and his or her agents, successors and assigns (“Landlord”), of the property located at \_\_\_\_\_ any and all information regarding my rural water and/or sewer service account(s) with SIRWA as well as any other relevant information affecting SIRWA’s service(s) with regard to the aforementioned property. I can be reached at the following contact phone number \_\_\_\_\_.

I understand the information is being disclosed and may be used only for the purpose of collecting delinquent accounts owned by SIRWA, enforcing SIRWA’s Rules and Regulations, and taking any necessary legal action with respect to SIRWA’s water and/or sewer service(s) to the aforementioned property.

This authorization expires at such time as Tenant vacates the premises affected by this authorization.

I understand that SIRWA reserves the right to disconnect water and/or sewer service(s) if this authorization and a \$75.00 deposit are not received by a SIRWA account representative on or before \_\_\_\_\_, 20\_\_\_\_.

I further understand that SIRWA, without further authorization, may redisclose said information to its attorney, insurers, anyone against whom a claim is or has been made, and court officials hearing such claim, and any agents, employees, or representatives of said persons.

I SPECIFICALLY AUTHORIZE AND CONSENT TO THE DISCLOSURE AND REDISCLOSURE DESCRIBED ABOVE.

Signed this \_\_\_\_ day of \_\_\_\_\_, 20\_\_\_\_.

\_\_\_\_\_  
Signature of Tenant

\_\_\_\_\_  
Signature of Owner

GRANTORS

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(STATE OF \_\_\_\_\_ )  
Ss:  
(COUNTY OF \_\_\_\_\_ )

On this \_\_\_\_ day of \_\_\_\_\_, 20\_\_\_\_, before me, the undersigned, a Notary Public in and for the aforesaid County and State, personally appeared: \_\_\_\_\_ to me known to be the same and identical persons who executed the within and foregoing instrument, and acknowledged that they executed the same as their voluntary act and deed.

\_\_\_\_\_  
NOTARY PUBLIC IN AND FOR SAID COUNTY AND SAID STATE