

**CITY OF SOLEDAD
UTILITY BILLING NOTIFICATION SYSTEM
OPT-IN FORM**

ACCOUNT NO: _____

NAME ON ACCOUNT: _____

SERVICE ADDRESS: _____

BILLING ADDRESS: (IF DIFFERENT FROM SERVICE ADDRESS)

Yes, I would like to receive notifications of Past-Due account status by:

<input type="checkbox"/>	Text	<input type="checkbox"/>	English
<input type="checkbox"/>	Voice Message	<input type="checkbox"/>	Spanish
<input type="checkbox"/>	Both text and phone message		

The cell phone(s) I want notifications sent to are:

Cell # _____

Cell # _____

Signature of Account Holder: _____

Date: _____

Note: Charges may apply depending on your cell phone service provider contract. The City is not liable for any incoming fees or charges to your cell phone account. The cost of sending the texts/calls will be paid for by the City of Soledad.