ELECTRONIC RECEIPT OF INVOICE FORM
E -Billing Consent Form

By this statement, I acknowledge that my water bill will only be sent to me electronically, at the email address listed below. I further understand that any use of the information below is for my sole convenience in matters relating to my water supply, for the purpose of improving my information by telephone, emails or text messages.

With this statement, I acknowledge that the water bill will be sent to me only in electronic form, to the email address listed below. I also understand that any use of the information below is for my exclusive service in matters related to water supply, with the aim of improving my information by phone, via emails or sms.

PLEASE COMPLETE ALL THE FIELDS PLEASE COMPLETE ALL THE FIELDS

Full name / Company name _____

Identity card number or Company registration number / ID card number or company Reg. number _____

Address / Your address _____
Street name and number / Street name and number

_____ _____
Z.K. / Postal CodeCity / City

Water supply account number / Water supply account number

E-mail address / Email address _____

Contact telephone / Mobile number _____

Date / Date _____

Consumer or company director's signature & stamp Please sign here

FOR OFFICIAL USE

Posted by:	Checked by: