

TO:
Wigwam Mutual Water Company
P O Box 569
Fountain, Colorado 80817

As a Shareholder in the Wigwam Mutual Water Company, I request that our monthly water bill from Wigwam Mutual Water Company be duplicated and a copy sent to our renter for purposes of convenience and to assist me in the reimbursement from my renter of water service charges generated by them. I understand that this request to send a duplicate copy of our monthly bill does not release me from any responsibility for payment of said water services, in a timely manner, and as set forth in Wigwam Mutual Water Company's Rules and Regulations, as amended from time to time. I further understand that any late notices will be sent to both addresses as stated below. Notice to terminate water service for non-payment will only be posted at the service address.

(Print) _____
Name of Property Owner of Record and Company Shareholder Phone Number

Street Address

City, State, Zip Code

Service Street Address

Signature of Shareholder of Record Date

Please make sure all your customer information is updated. You may go to www.wigwammutualwatercompany.org and download a customer sign up form. Please complete and mail to P O Box 569, Fountain, Colorado 80817

The following information to be completed by water company.

Account Number Legal Description

Special Conditions: