



**HERNANDO COUNTY UTILITIES DEPARTMENT
OPT OUT PAPER STATEMENTS REQUEST
AUTHORIZATION FORM**

Return this Form to:
Hernando County Utilities Department
Attn: Billing
7405 Forest Oaks Blvd.
Spring Hill, FL 34606
(352) 754-4037

This is my (our) authorization to my (our) STOP receiving paper statements. I understand that notifications printed on the statements will not be mailed to me. This authorization shall continue until notice of cancellation is received by Hernando County Utilities in such time as to afford a reasonable opportunity to act on it.

Opt Out Paper Statement EFT Participants

H.C.U.D. ACCOUNT NUMBER: _____

EMAIL ADDRESS: _____

TELEPHONE NUMBER: _____

This is my (our) authorization to my (our) STOP receiving paper statements. I understand that notifications printed on the statements will not be mailed to me. This authorization shall continue until notice of cancellation is received by Hernando County Utilities in such time as to afford a reasonable opportunity to act on it.

Signed **Date**

Opt Out Paper Statement – Web Account Registration Participants

H.C.U.D. ACCOUNT NUMBER: _____

EMAIL ADDRESS: _____

TELEPHONE NUMBER: _____

This is my (our) authorization to my (our) STOP receiving paper statements and agreement to sign up for Web access to my account. I understand that notifications printed on the statements will not be mailed to me. This authorization shall continue until notice of cancellation is received by Hernando County Utilities in such time as to afford a reasonable opportunity to act on it.

Signed **Date**

For Office Use Only

User/Registration set up: _____

Customer Representative/Account Specialist Initials: _____