

THE MUNICIPAL UTILITY DISTRICTS IN THE WOODLANDS

CUSTOMER INFORMATION CONFIDENTIALITY NOTICE

Under the provision of the Open Records Act, any person may request and is entitled to receive, almost any information retained by a governmental entity. Inasmuch as your municipal utility district is a political subdivision of the State and therefore, a governmental entity, the District is obliged to comply with the provisions of the Open Records Act. However, the Texas legislature passed H.B. 859 in 1993 providing customers of a Municipal Utility District the right to request that their address and/or telephone number remain confidential from all requesting parties with certain exceptions. The District must still provide this information to the following parties which are exempt from the confidentiality request provisions of the Open Records Act:

- An official or employee of the State or a political subdivision of the State, or the federal government acting in an official capacity;
- An employee of a utility acting in connection with the employee's duties;
- A consumer reporting agency;
- A contractor or subcontractor approved by and providing services to the utility or the State, a political subdivision of the State, the federal government, or an agency of the State or federal government;
- A person for whom the customer has contractually waived confidentiality for personal information; or,
- Another entity that provides water, wastewater, sewer, gas, garbage, electricity, or drainage services for compensation.

If you wish to elect the confidentiality provision and ask us to exclude this information from usual requests (exceptions noted above), please check "YES" below, complete the requested information and return this form to us, either with your bimonthly bill or separately.

You have no obligation to request this action, only the right. If you do not want this option, do nothing.

____ YES, I want to make my address and/or telephone number confidential from requests by entities or persons not specifically exempted by House Bill No. 859.

Signature

Printed Name of Account Holder

_____, The Woodlands, Texas _____
Service Address Zip Code

Please return this completed form to: *The Woodlands Joint Powers Agency
P.O. Box 7580
The Woodlands, Texas 77387-7580*
Email to billingdepartment@wjpa.org
or fax to 281-298-7216