



Request For Third Party Notification

Customer Name _____

Address _____

City _____

State _____ Zip _____

Phone (home) _____

(work) _____

(cell) _____

Account Number _____

THIRD PARTY NAME _____

Address _____

State _____ Zip _____

Phone (home) _____

(work) _____

(cell) _____

Third Party Signature _____

Northwest Gas has my permission to provide information to and accept information from the third party.

Customer Signature _____

Date _____

Northwest Gas will make every effort to send a copy of the Disconnection Notice to the third party specified. Northwest Gas assumes no liability for failure of a third party to receive or act upon the notice. For your convenience, complete this form and return it with your bill statement to:

Northwest Gas
314 Main Street NE
PO Box 721
Mapleton, MN 56065

Phone: (507) 524- 4103
Toll Free: 1-800-367-6964
Fax: (507) 524 4104