



**REVOKE**  
**MEMBER/OWNER'S AUTHORIZATION TO REMOVE AGENT**

I, the member/owner/agent identified by the signature below, hereby **REVOKE** my previous written instructions to appoint the agent named below. By my signature below I signify my understanding that:

1. 439 Water Supply Corporation **does not** collect a deposit from renters or agents. The corporation strongly recommends that member/owner/agent collect a deposit for his/her own protection.
2. All charges stay with the meter (not the user) and the member/owner is ultimately responsible for all charges against this meter, whether incurred by the member/owner/agent or a renter. **Any charges that remain unpaid are the responsibility of the member/owner.**
3. **439 Water Supply Corporation will continue to recognize this agent's previously granted authority until such time as the member/owner furnishes the corporation this completed form to revoke the powers granted to this agent.**
4. 439 Water Supply Corporation will do an interim final read only per request of renter or owner.

**METER #:** \_\_\_\_\_ **Date to Remove Previous Agent:** \_\_\_\_\_

**Service Address:** \_\_\_\_\_

|                                      |                             |
|--------------------------------------|-----------------------------|
| <b>Previous Agent's Information:</b> |                             |
| Name: _____                          |                             |
| Mailing Address: _____               |                             |
| City: _____                          | State: _____ Zip Code _____ |
| Telephone #: _____                   | Email: _____                |

|  |                             |
|--|-----------------------------|
| <b>Member/Owner/Agent's Information:</b> |                             |
| Name: _____                              |                             |
| Mailing Address: _____                   |                             |
| City: _____                              | State: _____ Zip Code _____ |
| Telephone #: _____                       | Email: _____                |
| Signature: _____                         | Date: _____                 |

6202 Sparta Road, Belton, TX 76513  
(P): 254-933-2133 (E): [439water@439watersupply.com](mailto:439water@439watersupply.com) (F): 254-933-2509

439 Water Supply Corporation is an equal opportunity provider and employer.

If you wish to file a Civil Rights program complaint of discrimination, complete the USDA Program Discrimination Complaint form (PDF), found online at [http://www.ascr.usda.gov/complaint\\_filing\\_cust.html](http://www.ascr.usda.gov/complaint_filing_cust.html), or at any USDA office, or call (866) 632-9992 to request the form. You may also write a letter containing all of the information requested in the form. Send your completed complaint form or letter to us by mail at U.S. Department of Agriculture, Director, office of Adjudication, 1400 independence Avenue, S. W., Washington, D. C. 20250-9410, by fax (202) 690 7442 or email at [program.intake@usda.gov](mailto:program.intake@usda.gov).