CALIFORNIA AMERICAN WATER COMPANY

1033 B Avenue, Suite 200 CORONADO, CA 92118 Revised

C.P.U.C. SHEET NO.

8056-W

CANCELLING

Revised

C.P.U.C. SHEET NO.

4088-W

CUSTOMER INFORMATION NEEDED

California American Water Company P.O. Box 578, Alton IL 62002

	11/01/2015			
			(T)	
Customer Name	Account Numbe			
Customer Mailing Address Customer Mailing Addres				
Sustainer Mailing Addres	3 2 Service Address	•	(T)	
Dear Customer,				
		ther pertinent information are missing from	(T)	
our records. To keep your account active, we kindly request that you complete the information and call us at 1-888-237-1333.				
£		····	(T) (C)	
f you have any questions, please feel free to contact our office at 1-888-237-1333 during California American Water's business hours. Sincerely,				
Customer Service				
Please Print				
Please Print	MI Last Name			
Please Print First Name				
Please Print First Name Mailing Address	MI Last Name House#, Street Name, City	, State, Zip Code		
Please Print First Name Mailing Address	MI Last Name	, State, Zip Code		
Please Print	MI Last Name House#, Street Name, City	, State, Zip Code		
Please Print First Name Mailing Address Service Address	MI Last Name House#, Street Name, City House #, Street Name, City	, State, Zip Code y, State, Zip Code		
Please Print First Name Mailing Address Service Address	MI Last Name House#, Street Name, City House #, Street Name, City	, State, Zip Code y, State, Zip Code		
Please Print First Name Mailing Address Service Address Home Phone Number	MI Last Name House#, Street Name, City House #, Street Name, City	y, State, Zip Code Social Security Number		
Please Print First Name Mailing Address Service Address Home Phone Number	MI Last Name House#, Street Name, City House #, Street Name, City	y, State, Zip Code Social Security Number		
Please Print First Name Mailing Address Service Address Home Phone Number	MI Last Name House#, Street Name, City House #, Street Name, City	y, State, Zip Code Social Security Number		
Please Print First Name Mailing Address Service Address Home Phone Number	MI Last Name House#, Street Name, City House #, Street Name, City	y, State, Zip Code Social Security Number		

(TO BE INSERTED BY UTILITY)		ISSUED BY (TO BE INSERTED BY C.P.U.C.		BY C.P.U.C.)
ADVICE LETTER NO.	1092	D. P. STEPHENSON	DATE FILED	11-5-2015
		NAME	EFFECTIVE	12-7-2015
DECISION NO.		DIRECTOR - Rates & Regulatory	RESOLUTION	