

3 RIVERS COMMUNICATIONS
ACCOUNT ACCESS AUTHORIZATION/PASSWORD FORM

*Name on 3 Rivers Billing Statement: _____

Phone # _____

| |
|---|
| For Office Use Only: Customer #: _____ Member #: _____ 3rc Taken by: _____ |
|---|

Current Subscriber Password (if already established): _____

To Add or Change Your Subscriber Password:

I wish to add/change my 3 Rivers Communications Subscriber Password to: _____
(Password must NOT be based on readily-available biographical information such as telephone or Social Security number, address, date of birth)

To Establish Security Questions in Case Subscriber Password is Forgotten

Please answer one of the following security questions which will be noted on your account to verify your identity if your password is forgotten:

Residential

Business

Birth City: _____
First Car: _____
Name of Favorite Pet: _____
Favorite Food: _____

What services does your business provide: _____
Who is the CEO of the business: _____
Where is your main office located: _____

To Establish Authorized Individual(s):

I authorize the individual(s) listed below to make inquiries or make changes to my account.

I understand that it is my responsibility to inform my authorized individual(s) of my password as they will be required to give it before 3 Rivers will allow any changes or release any information. I also understand that it is my responsibility to notify 3 Rivers Communications of any changes in authorized individuals.

Please print (or type) first and last names:

Telephone Number:

Authorized by: _____ Date: _____
Signature of Person Currently Listed on Account / and Title (if Business Account)

Printed (or typed) Name of Above Signature: _____