



## Authorized Agent & Personal Information Request Form

California residents have the right to designate an authorized person or corporate entity to exercise rights granted to them under the California Consumer Privacy Act (“CCPA”) as amended by the California Privacy Rights Act (CPRA) of 2020. To make this designation, California residents must complete and submit this form to:

**Attn: Customer Data Privacy,  
Mail Location: SC710M,  
Southern California Gas Company,  
1801 S Atlantic Blvd,  
Monterey Park, CA 91754-5207**

Authorized agents will need to include copies of two forms of identifications (see page 4 for list of accepted IDs). Incomplete forms or forms without proper signature will not be accepted. Authorized agents that have been provided a power of attorney pursuant to California Probate Code sections 4000-4465 may submit their documentation directly without completion of this form.

### Your Information

*Please provide the following information so that we can fulfill your request.*

#### 1. Represented Consumer Information:

I, \_\_\_\_\_ [first and last name] do hereby declare and certify under penalty of perjury under the laws of the State of California that I am a California resident and reside at \_\_\_\_\_ [street address] in \_\_\_\_\_ [city/town/zip code] in the State of California.

#### 2. Customer Account Number\* (for active and previous SoCalGas customers)

\_\_\_\_\_ (You can find your Customer Account Number at the top-left corner of the first page of your bill, or log on to your My Account on SoCalGas.com)

*\*If you have multiple customer account numbers and would like to request information for two or more customer account numbers, please list each account number in Section 6, below.*

Phone Number on Record: \_\_\_\_\_

Email Address on Record: \_\_\_\_\_



**3. Authorized Agent Information:**

If a natural person will be your authorized agent, please list their first and last name. If a business will be your authorized agent, please list the business name. The business must be registered with the California Secretary of State and in active standing:

I further certify that, (*Agent's name*): \_\_\_\_\_

Agent's Physical Address: \_\_\_\_\_

Agent's Email Address: \_\_\_\_\_

Agent's Phone Number (*with Area Code*): \_\_\_\_\_

in the State of \_\_\_\_\_ (*state*) has the authority to request on my behalf, my personal information requests of (*check all applicable boxes*)

- Right to Know Request
- Deletion Request <sup>(1)</sup>
- Correction Request (please list what you would like to correct in section 6)

and to receive information and/or request deletion of information under the California Consumer Privacy Act to SoCalGas on my behalf. I swear or affirm, under penalty of perjury, that this statement is true and correct.

I authorize SoCalGas to release the requested information to the agent's:

- Email address
  - Physical address noted above
- (*Please check ONLY ONE*)

**4. Consumer Authorization**

With this form, I authorize \_\_\_\_\_ (*Agent's name*) as my agent for the sole purpose of submitting a verifiable consumer request (as defined by Cal. Civil Code § 1798.140(y)) on my behalf under the California Consumer Privacy Act. I hereby release, hold harmless, and indemnify SoCalGas from any liability, claims, demands, causes of action, damages, or expenses resulting from: 1) any release of information to my Agent pursuant to this Authorization; 2) the unauthorized use of this information by my Agent; and 3) from any actions taken by my Agent pursuant to this Authorization.



**5. Represented Consumer Signature:**

*The represented consumer must sign below, but only in the presence of a notary public.*

<b>Signature of Represented Consumer:</b>	<b>Today's date:</b>
<b>Printed Last and First Name:</b>	

**Notarization**

<b>Name and Title:</b>	<b>Today's date:</b>
<b>County or State:</b>	

Has appeared before me, has proven to be the individual named in Section 1, and has acknowledged that this authorization is his or her wish.

<b>Signature of Notary Public:</b>	<b>Notary Seal:</b>
<b>Commission Expiration Date:</b>	

**The notary seal must be dated within 30 days of receipt of this document by SoCalGas.**

**6. Other Comments/Instructions:**

*Please enter any additional comments or instructions related to this request below. Examples include: list of what you would like to correct and requests for American Disabilities Act accessible file types (please specify accessible format requested: large font, braille, or screen reader).*

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- (1) CCPA allows for the deletion of personal information; however, there are exceptions provided under the law (as described in by Cal. Civil Code § 1798.105) where certain personal information must be retained by SoCalGas for business needs and/or other legal reasons.

**Acceptable Photo IDs**

State-issued Driver's License	U.S. Customs & Immigration Services Card
Voter Identification Card	Valid Passport from any country <sup>[1]</sup>
State-issued Identification Card	Student Visa
Matrícula Consular	Military identification Card
Credit Card with Photo	Employee Identification Card with Photo
Debit Card with Photo	U.S. Immigration Card
Resident Alien Identification Card	Foreign Driver's License <sup>[2]</sup>

**Acceptable Alternate IDs**

Pay Stub	Employee Identification Card
Social Services Card	Individual Tax Identification Number (ITIN) Document or Card
Credit Card with No Photo	I.N.S. Identification Card/I94 Card
Debit Card with No Photo	State of California Issued Security Guard Card
Certificate of Eligibility for Non-Immigrant Students (F-1, Form I-20, M-1)	The Intensive Supervision Appearance Program (ISAP/ICE ID)

[1] Final approval shall be determined by our Privacy Department.

[2] Must be issued by the government of another country (an International Driver's Permit is not acceptable).