



NEED A FRIENDLY REMINDER? REQUEST THIRD PARTY NOTIFICATION

If you ever forget to pay your natural gas bill – or know someone who does – take advantage of the Third Party Notification program. This program is no-cost and can help prevent natural gas service from being shut off.

Here's how it works:

- A customer of SoCalGas® chooses a third party, such as a friend, relative or social agency.
- If SoCalGas sends a late-payment notice or natural gas shut-off notice to the customer, the third party will receive a copy too.
- This duplicate notice gives the third party an opportunity to bring the late payment or shut-off notice to the customer's attention. The third party is not obligated to pay the overdue bill.

Enrolling is easy as 1, 2, 3

1. Complete the application on this page.
2. Have the person you selected as your third party sign the application as well.
3. Mail in the complete application to:
SoCalGas Third Party Notification - SC710J
PO Box 30337
Los Angeles, CA 90020-0337

Third Party Notification is part of our commitment to providing exceptional customer service. For more information, call us toll free at 1-800-427-2200.



APPLICATION FOR THIRD PARTY NOTIFICATION

Both you and the person you selected to receive third-party notifications must sign this application. Incomplete applications will not be processed. Please make sure all fields are filled in.

CUSTOMER INFORMATION

Account Number (see bill): _____

Customer Name (please print): _____

Address: _____ Telephone: _____

City: _____ ZIP: _____

I understand that I am still obligated to pay the SoCalGas bill on time. I understand that SoCalGas is not liable for failure to notify the third party. I understand that the third party is not obligated either to take action or to pay any part of my bill.

Customer signature (required): _____

THIRD PARTY INFORMATION

Note: This section should only include the information for the third party (such as friend, relative, or social agency) that should receive a copy of a late payment notice or shut-off notice. We will not process any application without the third party's signature below.

Third Party Name (please print): _____

Address: _____ Telephone: _____

City: _____ ZIP: _____

Third party signature (required): _____