

CALIFORNIA CONSUMER PRIVACY ACT
CALIFORNIA CONSUMER PERMISSION TO AUTHORIZED AGENT

INSTRUCTIONS: A California consumer should complete and sign this form to grant permission to another (the "Authorized Agent") to make a request pursuant to the California Consumer Privacy Act on the consumer's behalf. This information will only be used to process your request.

1. I, _____ (First, Middle Initial, Last Name) do hereby declare and certify that I reside at _____ (Street Address) in _____ (City/Town) in the State of California.

Please complete section 2A or 2B.

- 2A. I am a resident of the state of California and a customer of Mediacom with the following service account information:

Account Number	
Service Address	
Phone Number	

- 2B. I am a resident of the state of California but not a current customer of Mediacom with the following physical home address and phone number:

Home Address	
Phone Number	

3. I authorize _____ (Authorized Agent Full Name) of _____ (Street Address) in _____ (City/Town) in the State of _____ (State) to submit a Verified California Consumer Request on my behalf in order to obtain information and/or to request deletion or opt-out rights for me under the California Consumer Privacy Act.
4. I understand that Mediacom may need to verify my identity and confirm that I have provided my Authorized Agent permission to submit a Verified California Consumer Request on my behalf. I may be contacted at _____ (phone number) for these purposes.
5. I authorize Mediacom to provide its Verified California Consumer Request Response to my Authorized Agent in the manner my Authorized Agent further designates.

I swear or affirm, under penalty of perjury, that this statement is true and correct.

(Consumer Signature)