AUTHORIZATION TO: RECEIVE CUSTOMER INFORMATION OR ACT ON A CUSTOMER'S BEHALF



THIS IS A LEGALLY BINDING CONTRACT—READ IT CAREFULLY

(Please Print or Type) TITLE (IF APPLICABLE (Customer) have the following mailing address , and do hereby appoint MAILING ADDRESS to act as my agent and consultant (Agent) for the listed account(s) and in the categories indicated below: ACCOUNTS INCLUDED IN THIS AUTHORIZATION: SERVICE ACCOUNT NUMBER SERVICE ADDRESS 2. SERVICE ADDRESS SERVICE ACCOUNT NUMBER (For more than two accounts, please list additional accounts on a separate sheet and attach it to this form) INFORMATION, ACTS AND FUNCTIONS AUTHORIZED - This authorization provides authority to the Agent. The Agent must thereafter provide specific written instructions/requests (e-mail is acceptable) about the particular account(s) before any information is released or action is taken. In certain instances, the requested act or function may result in cost to you, the customer. Requests for information may be limited to the most recent 12 month period. I (Customer) authorize my Agent to act on my behalf to perform the following specific acts and functions (initial all applicable boxes): 1. Request and receive billing records, billing history and all meter usage data used for bill calculation for all of my account(s), as specified herein, regarding utility services furnished by the Utility¹. 2. EPA Benchmarking (authorizes usage information to be uploaded to the EPA's ENERGY STAR Portfolio Manager®). 3. Request and receive copies of correspondence in connection with my account(s) concerning (initial all that apply): a. Verification of rate, date of rate change, and related information; b. Contracts and Service Agreements; Previous or proposed issuance of adjustments/credits; or Other previously issued or unresolved/disputed billing adjustments. Request investigation of my utility bill(s). Request special metering, and the right to access interval usage and other metering data on my account(s). Request rate analysis. 7. Request rate changes. Request and receive verification of balances on my account(s) and discontinuance notices.

Revised 1/2014 Form 185-1000 Page 1 of 2

9. Other acts and functions (please specify) ___

¹ The Utility will provide standard customer information without charge up to two times in a 12 month period per service account. After two requests in a year, I understand I may be responsible for charges that may be incurred to process this request.

AUTHORIZATION TO: RECEIVE CUSTOMER INFORMATION OR ACT ON A CUSTOMER'S BEHALF

	MER) AUTHORIZE THE RELE MY BEHALF ON THE FOLLOW		NFORMATION AND AUTHORIZE MY AGENT TO ox only):
	above at the time of receipt of One year authorization - Recacepted and processed each Authorization. Authorization is given for the publication in duration to three years.	this Authorization). quests for information and a time requested within the period commencing with the ears from the date of exect	st for information and/or the acts and functions specified /or for the acts and functions specified above will be twelve month period from the date of execution of this e date of execution untilution.) Requests for information and/or for the acts and ed each time requested within the authorization period
RELEAS	E OF ACCOUNT INFORMATION	ON:	
	ty will provide the information preferred format is (check all t		extent available, via any one of the following. My
_	Hard copy via US Mail (if applica	•	
Facsimile at this telephone number: Electronic format via electronic mail (if applicable) to this e-mail address:			-mail address:
of Recor that my and perf authorize release t matters causes of Authorize pursuant submittir	d listed at the top of this form a Agent has authority to act on more than a specific acts and further to act on more than the specific acts and further than the specific acts and further than the specific acts and further than the specific acts and the specific acts are acts and the specific acts and the s	and that I have authority to y behalf and request the renctions listed above. I use releasing information or tay account or facilities to the e, hold harmless, and increases resulting from: 1) any e of this information by my grate changes. I understant must be signed by	ged to execute this document on behalf of the Customer financially bind the Customer of Record. I further certical elease of information for the accounts listed on this forward understand the Utility reserves the right to verify an aking any action on my behalf. I authorize the Utility is above Agent who is acting on my behalf regarding the demnify the Utility from any liability, claims, demand by release of information to my Agent pursuant to the y Agent; and 3) from any actions taken by my Agend that I may cancel this authorization at any time is someone who has authority to financially bind the municipality).]
	AUTHORIZED CUSTOMER S	SIGNATURE	TELEPHONE NUMBER
Executed	d this day of	ONTH YEAR	atCITY AND STATE WHERE EXECUTED
damages		e use of customer informa	ty from any liability, claims, demand, causes of actio tion obtained pursuant to this authorization and from the nanges.
	AGENT SIGNATURE		TELEPHONE NUMBER
COMPANY			
Executed	this day of	ONTH YEAR	

 $^{^2}$ If no time period is specified, authorization will be limited to a one-time authorization Revised 1/2014