

EPCOR Distribution and Transmission (EPCOR) 3rd Party Consent Form

EPCOR is committed to protecting personal information. We require your consent prior to disclosing your EPCOR energy details to any third party. To ensure your request is processed efficiently, please provide the following information and sign the authorization below. (Please print clearly and note all * fields are mandatory).

* SITE ID (S):	
*Address:	
*Primary Account Holder Name(s):	
*Individual(s) or Organization(s) authorized to receive information:	
*Information you would like EPCOR to provide (please be specific and include from and to dates:	12 Months of Historical Consumption Data
*This consent is valid until (please specify):	(DD-MM-YYYY)

Delivery Instructions for release of site specific energy data:

*Name of Individual, Organization or Company	
*Contact Name:	
*Mailing Address:	
*Contact Phone Number:	
*Email Address:	

AUTHORIZATION

I/we, the undersigned, hereby authorize and direct EPCOR Distribution and Transmission Inc. to release the information specified in this form. I/we acknowledge and agree that EPCOR has no control over, and shall bear no responsibility or liability for, the actions of a third party with respect to personal information released by EPCOR in accordance with this consent form.

*DATE: ____/____/____ (DD-MM-YYYY)

*Account Holder #1 Name: _____

*Signature: _____

*Account Holder #2 Name: _____

*Signature: _____

PLEASE NOTE: Where there is more than one account holder, EPCOR may be unable to fully provide all information authorized by this consent, unless all persons named on the account have signed this consent form.

PLEASE RETURN THIS FORM TO:

Attention: Romulo Agozar/Lisa Lamers

Fax Number: **780-412-7801**

Internal Only:

Date Received:	(DD-MM-YYYY)
Date Request Processed:	
Request Completed by:	Signature required