



Authorization and Release Form

TO: **ATCO Electric Ltd.**
10035 - 105 Street
Edmonton, Alberta T5J 2V6

Fax: (780) 508-4829

Email: CustomerCareCorrespondence1@atco.com

I/We _____,
("CUSTOMER") hereby requests and authorizes ATCO Electric Ltd. to release requested customer information related to the site ID(s) or service location(s) to the RECIPIENT listed below and acknowledges that such release may be subject to a fee in accordance with ATCO Electric's Terms and Conditions and tariffs.

Customer further agrees to release and hold harmless ATCO Electric Ltd. from any claims, damages, or expenses resulting from the use of or reliance upon the customer information including any unauthorized use or disclosure by the RECIPIENT.

- If the Customer is a corporation, then the individual executing this authorization certifies that he/she has authority on behalf of the Customer to bind the Customer in this regard. (Please check if applicable)
- If an Agent or consultant is acting on behalf of the Customer, then the Agent or consultant certifies that he/she/it has the authority to bind the Customer in this regard. (Please check if applicable).

Requested information;

- Site usage history report for the past 12 months
- Other - _____
- Other - _____



This request and authorization applies to the following site IDs:

See Attached

#	Customer Site ID	Service Location (LSD or Address)
1	_____	_____
2	_____	_____

(If the number of sites exceeds 20, the list must be submitted electronically.)

Preferred delivery method:

E-mail Fax Mail

CUSTOMER INFORMATION:

_____	_____	_____
Customer Name	Agent/Consultant (if applicable)	Customer Address
_____	_____	_____
City	Province	Contact Name
_____	_____	_____
Phone Number	Fax Number	Email

RECIPIENT INFORMATION:

_____	_____	_____
Name	Address	City
_____	_____	_____
Province	Contact Name	Phone Number
_____	_____	_____
Fax	Number	Email

_____ **Customer Authorization** _____ **Date**

Note: This authorization expires 90 days following the date on this form.