

# LETTER OF AUTHORIZATION

## TO RELEASE INFORMATION

To Canadian Valley Electric Cooperative, Inc.,

I am granting permission for \_\_\_\_\_ SS# \_\_\_\_\_  
NAME / TITLE OF PERSON RECEIVING INFORMATION SOCIAL SECURITY #  
effective \_\_\_\_\_ to receive information on my utility account(s) # \_\_\_\_\_  
DATE OF ACTION CVEC ACCOUNT NO.(S)  
\_\_\_\_\_ with Canadian Valley Electric Cooperative until further notice.  
CVEC ACCOUNT NO.(S)

Please allow them to receive information on my account(s) where indicated below:

\_\_\_\_\_ Inquire about balance on account(s) and due date(s)  
\_\_\_\_\_ Set up payment arrangements  
\_\_\_\_\_ Kwh usage information or history  
\_\_\_\_\_ Other --- please list \_\_\_\_\_

I release Canadian Valley Electric Cooperative of any liability arising out of releasing information to the above named person.

I understand if I want to remove the above named person from receiving information, I must immediately notify Canadian Valley Electric Cooperative, Inc.

Please do not hesitate to contact me if you have any questions concerning this matter concerning my account(s).

Signature of Account Holder \_\_\_\_\_

Name: \_\_\_\_\_ CVEC Employee: \_\_\_\_\_

Date: \_\_\_\_\_ Date: \_\_\_\_\_

Address: \_\_\_\_\_

City: \_\_\_\_\_

State: \_\_\_\_\_

Phone Number: \_\_\_\_\_