Customer Consent for Release of Utility Account Information Form

The Customer Consent for Release of Utility Account Information Form permits a current Roseville Electric customer of record holder to specifically delegate certain rights to third parties concerning their Roseville Electric account(s). Roseville Electric considers all customer information to be confidential. The customer of record must specify what information the third party is entitled to receive. The customer of record further agrees to release and hold harmless Roseville Electric from any claims, damages, or expenses resulting from use of or reliance upon the customer information including any unauthorized use or disclosure by the recipient or third party.

If the person requesting is a customer employee, then the individual executing this authorization certifies that he/she has the authority to request and release this information.

If an agent or consultant is acting on behalf of the customer, then the agent or consultant certifies that he/she/it has a letter of authorization from the customer to make such a request.

If the customer of record is acting on their own behalf then the information requested will be sent ONLY to the customer of record information shown on this form.

	Customer of Record Name:	Agent/Consultant Name (if applicable):	
	Address:	Phone Number :	
	Fax Number :	Email: * (required)	
	Roseville Electric Account Number (1):	Roseville Electric Account Number (2):	
*/	All responses from Roseville Electric shall be via email.		
RECIPIENT/THIRD PARTY INFORMATION			
	Name:	Address:	
	Phone Number :	Email: *(required)	
*/	All responses from Roseville Electric shall be via email.		
R	REQUESTED INFORMATION		
	Billing History Report* (# years)	AB1103, Aggregate Energy Disclosure	
*Includes customer monthly energy, demand, and costs.			
	hereby authorize Roseville Electric to obtain information regarding historical energy usage and billing information, and will allow the release of this information to the Recipient/Third Party named on this form.		
С	sustomer/Agent/Consultant Name: Signati	ure: Date:	
This authorization expires 90 days following the date on this form.			



CUSTOMER OF RECORD INFORMATION