

Utility Release of Information

Utility Release of Information Date	
This se	erves as Authorization to Release Utility Data Information
To:	
	(Company Requesting Information)
From:	
	(Company Releasing Information)
Authori	zed Signature:
Printed	Name Title
Phone	Number: Email Address:
For Loc	cations listed below:
1)	Address:
	Contract Account Number
2)	Address:
	Contract Account Number
3)	Address:
	Contract Account Number
4)	Address:
	Contract Account Number
The las	st two years of usage history for the aforementioned customer and addresses listed will vided.
The ab	ove information should be sent to the attention of:
Reques	stor Name:
Phone	Number: Email Address:
	Electric/Water Utility

Rochester Public Utilities

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THIS AUTHORIZATION EXPIRES ONE HUNDRED TWENTY DAYS AFTER IT IS SIGNED