

Utility Release of Information Date______ This serves as Authorization to Release Utility Data Information

This serves as Authorization to Release Utility Data Information		
To:		
		(Company Requesting Information)
From:		
		(Company Releasing Information)
Author	rized Signa	ature:
Printed Name		Title
Phone	Number:	Email Address:
		ted below:
	Contract	Account Number
2)	Address:	
	Contract	Account Number
3)	Address:	
	Contract	Account Number
4)	Address:	
	Contract	Account Number
The last two years of usage history for the aforementioned customer and addresses listed will be provided.		
The above information should be sent to the attention of:		
Requestor Name:		
Phone Number:		Email Address:

Electric/Water Utility Rochester Public Utilities

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Caleb Scheel (507)-280-1533 cscheel@rpu.org Laurie Cook 507-280-1607 lcook@rpu.org

THIS AUTHORIZATION EXPIRES ONE HUNDRED TWENTY DAYS AFTER IT IS SIGNED