

Customer Authorization to Release Gas and/or Electric Usage Information

SECTION A - CUSTOMER INFORMATION								
Customer								
(company) name: Customer				Customer				
contact name:				phone	number:	()	-	
SECTION B - RECIEPIENT INFORMATION								
Send information to:							party	
Name:			E-mail:					
Address:								
City: State:					Zip Code:			
SECTION C- REQUESTED INFORMATION								
INFORMATION TO BE RELEASED - Usage records for the following facilities may be released:								
		Releas	Release electric					
Facility address	City, state, z		gas usage data (check below)		usage data (check below)		t number	Meter number
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AVAILABLE REPORTS								
Natural Gas - 12 month summary by account (if available) Beginning						// Ending//		
Natural Gas - 12 month interval details by account (if available) Beginning						// Ending/_/_		
Natural Gas - 3 year comparison by account (if available) Beginning						/ / Ending/ /		
Electric - 12 month summary by account (if available) Beginning						// Ending/_/_		
Electric - 12 month interval details by account (if available) Beginning						// Ending/_/_		
Electric - 3 year comparison by account (if available)					Beginning		_ End	ling/_/_
The undersigned requests WPS to supply the information listed above in Section C to the recipient in Section B. The customer also hereby releases WPS from any and all liability arising from or connected with providing this information.								
Authorized custom	er signature:					1		
Title of person sign	ing:					Date:		
RETURN THIS FORM TO THE BUSINESS SOLUTIONS CENTER:								
Email: businesscenter@wisconsinpublicservice.com								
Fax: 1-800-305-9754								
If you have questions, call the WPS Business Solutions Center at 1-877-444-0888.								