



Authorization for Release of Customer Information

Purpose

The Authorization for Release of Customer Information is a form that was developed to permit an "Account Holder" to specifically delegate certain rights to an "Authorized Party" concerning Shakopee Public Utilities (SPU) electric and/or water accounts. The "Account Holder" may permit a third party to receive information or transact business on his/her behalf.

Account Holder

Customer Name

Account Number(s)

Street Address

City

State

Zip Code

Authorized Party

Name of Person(s), Agency, or Company

Phone Number

Street Address / P.O. Box

City

State

Zip Code

Authorization

By my signature below, I, the "Account Holder," certify that I am a customer of Shakopee Public Utilities maintaining an electric and/or water account in my name. I understand and agree that this authorization includes the release and discussion of all information concerning my SPU account(s) to the "Authorized Party," including, but not limited to, the billing and payment history.

I hold Shakopee Public Utilities, its employees, officers, and agents harmless from all liability that may arise from information released as a result of this Authorization. I understand that I may cancel this authorization at any time by submitting a written request.

Account Holder Printed Name

Account Holder Signature

Date

Mail the completed form to:

Shakopee Public Utilities | Customer Service Coordinator | PO Box 470 | 255 Sarazin Street | Shakopee, MN 55379-0470

Or fax the completed form to:

(952) 445-7767

Please keep a copy of the completed authorization form for your records