



Third-Party Authorization and Consent Form

EPCOR Distribution & Transmission Inc.
Customer Connections

2022-MARCH-01

EPCOR Distribution & Transmission Inc. ("EPCOR") is committed to protecting your information.

For this reason, we require your written consent prior to disclosing information about your EPCOR service or project information to any Third-Party, or interacting with any Third-Party acting on your behalf.

To ensure your request is processed efficiently, please provide all the following information and sign the authorization below. *Please print clearly.*

Customer (Property Owner) Information

Primary Contact/Account Holder Name:		Other Account Holder Names*:	
Name of Business/Organization: (if applicable)			
Site Address (the "Property"):			
City:	Province:	Postal Code:	
Primary Contact's Phone Number:	Primary Contact's E-Mail Address: (optional)		

*** NOTE:** Where there is more than one account holder, EPCOR may be unable to fully provide all information authorized by this consent, unless all persons named on the account have signed this consent form.

I/we, the undersigned, agree to the following:

- 1) I authorize EPCOR to release any information related to my EPCOR service and project ("customer information"), for the Property listed above to the individual(s) and organization(s) named and listed below.
- 2) I authorize the individual(s) and organization(s) named and listed below to provide information to EPCOR on my behalf regarding my EPCOR service and project, for the Property.
- 3) I authorize the individual(s) and organization(s) named and listed below to act on my behalf regarding my account, property, and project, for the Property listed above.
- 4) I understand that I must notify EPCOR immediately, in writing at ces@epcor.com, if I choose to no longer allow the individual(s) and organization(s) named and listed below to request or receive information. I acknowledge that this authorization is valid for a period of two years from the date signed or when my project is energized, whichever occurs first.
- 5) I understand that the individual(s) and organization(s) named and listed below includes their/its employees, consultants, contractors and agents.
- 6) I acknowledge and agree that EPCOR has no control over, and shall bear no responsibility or liability for the actions of a Third-Party with respect to the specific customer information released by EPCOR in accordance with this consent form.

Initial: _____

Authorized Third-Party Information #1

Individual(s) or Organization(s) authorized to act as a Third-Party:		
Name of Business/Organization: (if applicable)		
Address:		
City:	Province:	Postal Code:
Phone Number:	E-Mail Address:	

Authorized Third-Party Information #2

Individual(s) or Organization(s) authorized to act as a Third-Party:		
Name of Business/Organization: (if applicable)		
Address:		
City:	Province:	Postal Code:
Phone Number:	E-Mail Address:	

Authorized Third-Party Information #3

Individual(s) or Organization(s) authorized to act as a Third-Party:		
Name of Business/Organization: (if applicable)		
Address:		
City:	Province:	Postal Code:
Phone Number:	E-Mail Address:	

Account Holder Signature(s)

Primary Contact/Account Holder Signature

Other Account Holder Signature

Primary Contact/Account Holder Printed Name

Other Account Holder Printed Name

Date

Date

Please submit this form with your application. If you have any questions about this form, please contact EPCOR Customer Engineering Services at ces@epcor.com.