

Usage and/or Billing History Information Release Form

Return completed forms to:

Email – BillingUsageRequests@pacificorp.com

Mail – Rocky Mountain Power C/O Billing Usage Requests PO Box 25308 Salt Lake City, UT
84125-0308

Fax – 1-800-842-8458

Customer Name: _____

Address (include apartment, if applicable): _____

City: _____

State and Zip: _____

Customer Account Number(s): _____

Authorizing release of (initial one box only):

- Both Usage History and Billing Information – Requestor may request and receive monthly kWh consumption and billing history for the proceeding 12-month period from the date of each request.
- Billing Information only – Requestor may request and receive billing history for the proceeding 12-month period from the date of each request.
- Usage History only – Requestor may request and receive monthly kWh consumption for the proceeding 12 month period from the date of each request.
- Other (Please specify) _____

Released information to be used for (initial all that apply):

- HUD utility analysis and/or allowances
- Weatherization
- Other (Please specify) _____

I (CUSTOMER) AUTHORIZE THE RELEASE OF MY ACCOUNT INFORMATION ON THE FOLLOWING BASIS* (initial one box only):

- One-time authorization only (limited to a one-time request for information specified above at the time of receipt of this Authorization).
- One year authorization - Requests for information specified above will be accepted and processed each time requested within the twelve-month period from the date of execution of this Authorization.
- Authorization is given for the period commencing with the date of execution until _____ (Limited in duration to three years from the date of execution.) Requests for information specified above will be accepted and processed each time requested within the authorization period specified herein.

*If no duration is specified, authorization will be limited to a one-time release.

Comments: _____

CUSTOMER, PLEASE READ BEFORE SIGNING:

- The Usage History and/or Billing Information Release Form provides our customers a mechanism to authorize Rocky Mountain Power to share data with specified third parties.
- Rocky Mountain Power is committed to safeguarding customer information. We will not share customer account or energy usage data with third parties unless authorized by the customer.
- The attached release form enables Rocky Mountain Power to track the type of information a customer wishes to share with a third party and for how long.
- Rocky Mountain Power can and will revoke releases upon customer request at any time.
- Any alterations to this authorization form after it's been executed by the Rocky Mountain Power customer will render the form null and void.

Authorization:

I (Customer), by signing below authorize PacifiCorp, doing business as Rocky Mountain Power ("PacifiCorp"), to release kilowatt-hour consumption data and/or billing information corresponding to the account(s) identified above to the party listed below. I hereby waive any claims against PacifiCorp arising out of or in any manner related to the release of such consumption, usage, and billing information.

I understand that I may cancel this authorization at any time by submitting a request in writing to PacifiCorp. Such cancellation will not be valid if action was already taken.

Release Information To: FCAOG Weatherization Assistance Program

Customer Signature: _____

Date: _____

REQUESTOR, PLEASE PRINT ENTITY NAME AND READ BEFORE SIGNING:

FCAOG Weatherization Assistance Program (Third Party Requestor), hereby releases, holds harmless, and indemnifies the Utility from any liability, claims, demand, causes of action, damages, or expenses resulting from the use of customer information obtained pursuant to this authorization and from the taking of any action pursuant to this authorization, including rate changes.

Entity / Company

Name: FCAOG Weatherization Assistance Program

Signature: _____

Date: _____

Title: Operations Manager

Telephone

Number: 435-586-0585

Email address: dalvey@fivecounty.utah.gov