



Release Form - Power Usage History

This form allows EMR to obtain electric account usage information from PPL. Usage information is necessary in order to obtain competitive bidding from qualified suppliers. EMR and qualified suppliers will treat customer usage information as confidential and will not share it with other parties.

Name of Business: _____

Contact Person: _____ Title: _____

Phone: _____ Fax: _____ Email: _____

Billing/Mailing Address: _____

Service Address	PPL Account Number*	Rate Class	Annual Spend
1.			
2.			
3.			
4.			
5.			

I authorize release of PPL Electric Utility information to Energy Management Resources for the above listed accounts. I understand that release of this information allows EMR to act on my behalf to secure competitive power bids from qualified suppliers, but is not an obligation to or selection of a supplier for these electric accounts.

Signature: _____ Date: _____

Fax or Email this signed form to:

Energy Management Resources

Attention: Jim Baldauf

Fax: 816 883-1001

Email: jbaldauf@emr-energy.com

*the 10 digit account number located at the upper right of your PPL Electric Utilities invoice.