

Account Access for Information Form

Who needs to access your account? Currently, only the name on account, and any contacts provided in writing have access to information regarding your account. If written authorization is not provided, individuals who are not a name or contact on account will not be able to access any account information. This includes balance, payment, bill, usage, readings or outage information. If you would like to authorize a third party on your account please provide contact information.

Please complete one contact definition per form.

Contact name: _____

Affiliation: _____

Phone: _____

Email: _____

Type of Access (appears for each contact):

- Full access to Account Information: Access to update name, mailing, request move, payment information, access to balance and usage information, access to bills, conservation programs, outage reporting
 - Start Date: _____ (MM/DD/YYYY)
 - End Date: _____ (MM/DD/YYYY)

- Payment Information: Access to balance and payment information, this includes right to make payment arrangements
 - Start Date: _____ (MM/DD/YYYY)
 - End Date: _____ (MM/DD/YYYY)

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- Usage information: Access to reading and usage information
 - Start Date: _____ (MM/DD/YYYY)
 - End Date: _____ (MM/DD/YYYY)

- Access to Utilismart: access to web portal to view interval meter data.
 - Start Date: _____ (MM/DD/YYYY)
 - End Date: _____ (MM/DD/YYYY)

- Bill information: Access to view and receive bills.
 - Start Date: _____ (MM/DD/YYYY)
 - End Date: _____ (MM/DD/YYYY)

- Conservation Program Information: Access to inquire and apply for Conservation programs
 - Start Date: _____ (MM/DD/YYYY)
 - End Date: _____ (MM/DD/YYYY)
 - Account Type:
 - Residential
 - General Service < 50 kW
 - General Service > 50 kW

- Outage Contact: Individual to contact when there is a scheduled outage
 - Please provide preferred method of communication for scheduled outages:
 - Home Phone : _____
 - Mobile Phone: _____
 - Email: _____
 - SMS/Text: _____
 - Delivery of letter



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Authorization

Account Number: _____

Name of Authorized Person (individual must be a name on the account): _____

Title of Authorized Person: _____

Signature of Authorized person named on account: _____

Please provide additional account numbers on which the authorized person/name on account has access that these contacts apply.

Does access apply to all accounts with authorized person name on the account? Yes No

Completed forms can be mailed or emailed to Customer Service. Mail or Drop Off at:

**Niagara Peninsula Energy Inc.
Customer Service Department
7447 Pin Oak Drive
P.O. Box 120
Niagara Falls, Ontario
L2E 6S9
Email: info@npei.ca**

Please include Request for Information in subject or reference line.

For inquiries regarding your request, please contact customer service:

**Toll Free: 1-877-270-3938.
T: 905-356-2681 F: 905-356-0118 E: info@npei.ca Web: www.npei.ca**