



**LETTER OF AUTHORIZATION**

Thank you for considering QVINTA ENERGY for your energy procurement needs. So that we may verify your estimated utility usage, please complete the information below and sign in the space provided. Your signature **does not obligate** you or your company to purchase deregulated electricity or natural gas through QVINTA or any of its suppliers.

By completing this form, I HEREBY confirm that I am the ( ) account holder or ( ) authorized representative for the account(s) listed below, and that I authorize the named local utility company(s) to furnish QVINTA and its suppliers with the historical energy usage and load data for the account(s) listed.

Signed Name \_\_\_\_\_ Date \_\_\_\_\_ Printed Name \_\_\_\_\_  
 Title (if applicable) \_\_\_\_\_ Company Name (if applicable) \_\_\_\_\_  
 Phone: \_\_\_\_\_ Fax: \_\_\_\_\_ Email \_\_\_\_\_

UTILITY COMPANY NAME: _____ TYPE: ( ) Electric ( ) Gas	
ACCOUNT HOLDER NAME: _____ (As Written on Utility Bill)	
BILLING ADDRESS: _____ (No. and Street) (City/Town) (State) (Zip Code)	
<b>Account Number (s)</b>	<b>Complete Site/Service Address</b>

UTILITY COMPANY NAME: _____ TYPE: ( ) Electric ( ) Gas	
ACCOUNT HOLDER NAME: _____ (As Written on Utility Bill)	
BILLING ADDRESS _____ (No. and Street) (City/Town) (State) (Zip Code)	
<b>Account Number (s)</b>	<b>Complete Site/Service Address</b>