

**Neenah Utilites** 211 Walnut St **PO Box 426 Neenah, WI 54957** 

## **CONSENT TO DISCLOSE UTILITY CUSTOMER INFORMATION**

This form was prepared by the Public Service Commission of Wisconsin as required by Wis. Stat. § 196.137(4).

Requesting Entity Name (if applicable)

Contact Person\_

Mailing Ad	dress				
Phone_(	)	Fax_(	)	Email	<del></del>
The persor related to: includes yo	□ electric; □ our account	entified above re □ gas; □ water; or balance, paymen	□ all servion t history ar	tomer information, including ses provided by the utility. Sund total use per billing period. In total use per billing period.	uch information The information
Your inforr Stat. § 196 your decisi By signing account an entity liste by sending	.137. You all on not to authis form you all that you all on this for a written re	ated as private by re not required to uthorize the disclosure acknowledge and the utilism. This consent equest with your	o authorize osure will n nd agree th ty to disclo is valid unt name and s	and can only be disclosed as the disclosure of your custom ot affect your utility service. nat you are the customer(s) of se your customer information il you terminate your service, service address to the utility a te this consent at any time.	record for this to the requesting or withdraw consent
Please con • Em	nplete this f	orm and return i nau@ci . neena	t to the uti	·	
	_\	86 - 6150 Utilities,	PO Box	426, Neenah, WI 549	957
CUSTOME	R ACCOUNT	NUMBER			
SERVICE AI	DDRESS				
PRINTED C	USTOMER(S	S) NAME			
SIGNATUR	E OF CUSTO	MER(S)			
DATE SIGN	IED		CUSTOME	R PHONE NUMBER_()_	
	P	lease complete seg	oarate conse	ent forms for each utility account	<u>.</u>