

MURRAY ELECTRIC SYSTEM

Authorization Form

Authorized Persons on Service Account

Name of Service Custon	ner:	
Service Address:		
Service Account#:		
Authorization is being g	iven to:	
Name:		
Address:		
		ŧ
		(used for verification purposes)
Relationship to Service	Account Holder (check on	• • •
☐ Parent ☐ Guard	lian \square Other (please list):	
account with Murray Elewish to authorize):	ectric System. This shall in	pove individual(s) to have access to my include the following: (check each box that you Change general information (ex. Phone#)
☐ Connect/Disconnect	BB services □ Change BB	
Signature (service cus	tomer)	Date:
Signature (authorized u	ser)	Date: