## Third- Party Release Form

This third-party release form authorizes Santee Cooper to release your account information by email to a designated third party.

	Information				
Name on Account:	First Name:		Last Name:	Last Name:	
	Business Name:				
Account Verification:	Electric Account Number(s):		Last 4 of your SSN/F	Last 4 of your SSN/FID (required):	
Contact Information:	Email Address:		Primary Phone:	Primary Phone:	
Service Address:	Street Address:		Apt/Unit/Lot #:	Apt/Unit/Lot #:	
	City:	State:	Z,;	3 Code:	
•	and authorization applies t			uthorize Santee Cooper to	
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Third Party	Name/Agency:		omy by official to:		
Third Party Information	Name/Agency: Phone:		Email:		
Authorizatio The account i authorize the ein effect up	Phone:  n  nformation is being release e release of my account inf	ed for the sole purpose ormation, to the person of the assistance proce	Email:  of determining eligibility for some significant contents of the second contents of	tand this authorization will e. By my signature below, I	

3 O H D V H V X E P L W F R P S O H W H G D Q G V L J Q H G I R U P W R vouchers@santeed

Office Use: