

RELEASE OF UTILITY CUSTOMER ACCOUNT INFORMATION

CONSENT TO THE RELEASE OF UTILITY INFORMATION:

- I hereby authorize the GUAM POWER AUTHORITY to release the requested utility account information to the Guam Department of Administration (DOA), its employees, contractors, and assignees.
- I understand that my utility information will be used to determine my qualification and/or financial assistance under the *Emergency Rental Assistance* (ERA) program, a grant by the U.S. Department of Treasury administered by DOA.
- Information obtained under this consent is limited to utility charges, payments, payment plans, and consumption for the address (premise) provided below for utility service provided and/or billed beginning March 1, 2020 and through the ERA program eligibility period.
- I understand that this consent is optional. I may provide my utility account information directly to DOA and that the information I provide is subject to verification by DOA & GPA.

GPA SERVICE LOCATION (Premise)

Address _____

Village _____

GPA ACCOUNT HOLDER INFORMATION

Name (Last, First, MI) _____

Account # _____

Contact/Telephone # _____

Check one:

I am the primary account holder

I am not the primary account holder but I am authorized person on the account

Residential Account Type - Check one:

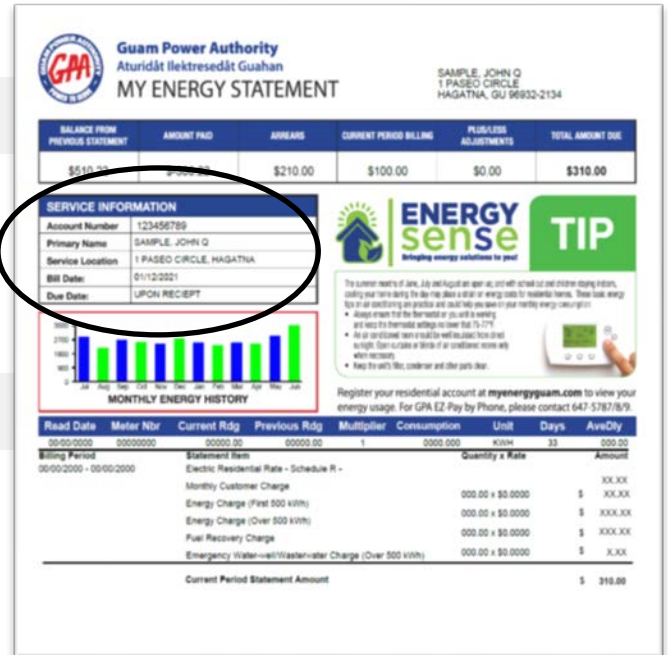
Pre-Paid

Post-Paid

I understand that GPA may contact me regarding this request.

X _____
Signature of Account Holder

Date



GPA USE ONLY:		DOA USE ONLY:	
<input type="checkbox"/> Acct Info Verified	RECEIVED (Date/Time):		
<input type="checkbox"/> Sent to DOA	<input type="checkbox"/> Hard Copy <input type="checkbox"/> E-Copy		
Date:			

