



How did you learn about this Energy Efficiency Program?

- ☐ Advertisement ☐ Internet Search ☐ Mailer ☐ Video
☐ Tradeshow/Event ☐ Word of Mouth ☐ Radio ☐ Contractor
☐ Other _____

FUEL RELEASE AUTHORIZATION FORM

Property Information

Property Name				
Property Address		City	State	Zip
Contact Name	Contact Phone		Contact E-mail	
Designated Representative for Info Release	Contact Phone		Contact E-mail	

Energy Provider Information

Electric	Electric Utility Company		Account Number	
Account Name	Account Mailing Address (if different from above)	City	State	Zip
Other account numbers associated with this facility: (Additional space is provided on page two of this form to include other locations.) _____ _____				
	Natural Gas Utility Company		Account Number	
Account Name	Account Mailing Address (if different from above)	City	State	Zip
Other account numbers associated with this facility: (Additional space is provided on page two of this form to include other locations.) _____ _____				
	Oil Supplier Name		Account Number	
Account Name	Account Mailing Address (if different from above)	City	State	Zip
Other Propane, Steam, Chilled Water, Etc.	Energy/Resource Provider		Account Number	
Account Name	Account Mailing Address (if different from above)	City	State	Zip
By signing this form, I hereby authorize New Jersey's Clean Energy Program (NJCEP) or its designated representative, to obtain energy usage data, on my behalf, regarding my facility past and present energy usage for the purpose of benchmarking and/or auditing my facility's energy usage efficiency. This data shall be kept confidential and shall not be shared with any third parties, other than those designated by NJCEP for management of its energy efficiency programs. The data shall not be published or used for any other purpose without my expressed written consent.				
Name of Authorized Representative (please print)		Title		
Signature		Date		

Other facility locations to include in fuel release authorization:

[illegible]