

Definitions

ACCOUNT ACCESS AUTHORIZATION

To authorize AltaGas Utilities Inc. (AUI) to allow a 3rd party access to your account information, or to add a co-responsible person, please complete this form. If you wish to authorize access to multiple accounts in the same name, please attach a list of those account numbers to this authorization form. For accounts with unique names, please complete a separate Account Access Authorization Form for additional account(s).

"Current Account Holder" means the individual, business/company, or authorized representative for business/company who first set up the account.				
"Customer Information" means personal information like your name, address, contact information, identifying numbers, and payment and usage information.				
"Co-Responsible" means the authorized individual(s) or business/company with complete access to an AUI customer's account, including their Customer Information and the ability to make changes to their account. The Co-Responsible is also jointly and severally responsible for any/all AUI charges applicable to the account.				
"Authorized 3 rd Party" means authorized individual(s) or business/company with complete access to an AUI customer's account, including their Customer Information and the ability to make changes to their account. An Authorized 3 rd Party is <u>not</u> financially responsible for AUI charges applicable to the account.				
Current Account Holder Information				
AltaGas Utilities Inc. Account Number				
Name of Account Holder				
Home Phone	Bus/Work		Cell	
		Ext		
Email Address		Alternate Email/Contact		
Selection and Authorization				
Complete only Section A <u>OR</u> Section B				
Section A Individual Authorization				
Complete this portion if you are an individual who would like to add a Co-responsible or Authorized 3 rd Party contact to your account.				
Type of Authorization Co-Responsible Authorized 3 rd Party (please check appropriate box)				

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ACCOUNT ACCESS AUTHORIZATION

Section B Business/Company	Authorization			
Complete this portion if your business/company would like to add a Co-Responsible or Authorized 3 rd Party contact to the account.				
Party Contact to the account.				
Type of Authorization Co-Responsible Authorized 3 rd Party (please check appropriate box)				
The following are authorized in the capacity as checked above. Names and signatures of authorized individuals or authorized representatives for a business/company are required.				
Name of Authorized Individual or Business/Company (please print)				
Name of Authorized Business/Company Representative (please print)				
Home Phone	Bus/Work		Cell	
		Ext		
Email		Alternate Email/Contact		
Date	Signature of Co	Signature of Co-Responsible Party or Authorized 3 rd Party		
If required, please attach any additional authorizations and required information and signatures to this form.				

Removing an Authorized 3rd Party or Co-Responsible Party from an Account

If an Authorized 3rd Party or Co-Responsible is removed from an account, AUI will not notify either party the request or removal has been made. Confirmation can be obtained by contacting our Customer Care Centre at 1-866-222-2067 or customercare@altagasutilities.com.

Request to Remove Authorized 3rd Party from an Account

AUI will remove an Authorized 3rd Party upon verbal request from either the Current Account Holder or the Authorized 3rd Party.

Request to Remove Co-Responsible Party from an Account

- If the account has no money owing and does not have a history of bad debts, AUI will, upon verbal or written request from either the Current Account Holder or the Co-Responsible, close the account and establish a new account for the party remaining at the premise.
- If there are arrears on the account, the amount outstanding must first be paid before any changes may be made to the account.
- Deposits, if any, will be refunded to the Current Account Holder.

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ACCOUNT ACCESS AUTHORIZATION

Current Account Holder Authorization

I agree, as per the selections and authorized parties identified above; AUI may provide access to the			
account.			
Name of Account Holder or Authorized Representative (please print)			
Title (if hyginess/semany account)			
Title (if business/company account)			
Date	Signature		

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