

MC Number: _____

AUTHORIZATION FOR RELEASE OF STATE TAX RECORDS

In accordance with Sections 505 and 506 of the Public Utility Code, as a means to verify the accuracy of financial information supplied to the Public Utility Commission, I hereby authorize the Pennsylvania Department of Revenue to release to the Public Utility Commission, any tax records filed or compiled with regard to the below-listed utility and/or individual.

Utility Name

X

Signature

Date: _____

Name (Printed)

Title

AFFIDAVIT

I affirm that the information reported herein is complete, true and correct.

(Signature of Individual or Officer)

(Date)

READABLE (PRINT OR TYPE) NAME OF INDIVIDUAL or OFFICER ABOVE:

NOTARIZATION (Required)
Subscribed and sworn to before me

this _____ day of _____ 2014

TRADE NAME OR CORPORATE NAME OF UTILITY:

NOTARY SIGNATURE

FEDERAL ID:

TELEPHONE NO.:

Office ()

Ext.

Cell ()

OFFICIAL
SEAL

(Official Title)

Name of person to be contacted for additional information:

(Date My Commission Expires)

Name: _____
(printed)

Telephone: _____ Ext.