

## **Duke Electricity Data Authorization Form**

This form may be used when benchmarking buildings with multiple tenants, when a third-party partner is completing the benchmarking, or when the individual requesting data is not utility customer of record.

Please contact Duke Energy at billhistory@duke-energy.com or 800.700.8744 to determine whether it is necessary to submit this form for your property.

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REQUESTOR CONTACT INFOMATION								
Contact Person:			Company:					
Phone:	Fax:	Emai			:			
Address:				Unit #	City	State	Zip	
TENANT/CUSTOMER OF RECORD CONTACT INFORMATION								
Contact Person:			Company:					
Phone:	Fax:		Email:					
Address / Physical Location of Utility Meter(s):				Unit #	Orlando	FL	Zip	
Billing Address:				Unit #	City	State	Zip	
TIME PERIOD REQUESTED								
From (MM/YYYY):			o (MM/YYYY):					
ELECTRICITY								
Name as listed on bill: Utility			ity Name:		Utility Account #:			
AUTHORIZATION TO REVIEW UTILITY ACCOUNT HISTORY								
I hereby authorize the above named requestor and/or their designated representatives to obtain records, from Duke Energy Florida, on demand documenting monthly consumption of energy or water for the accounts listed above. I authorize the release of records for the time period indicated above plus up to one year after today's date. I agree to release Duke Energy Florida from all legal liability from the disclosure of my data. Specifically, I hereby release Duke Energy Florida from, and waive and agree not to sue Duke Energy Florida for any losses, liabilities, claims, damages, costs, or expenses which I may have under any theory of law including, but not limited to, negligence, gross negligence, contract, and/or intentional tort, arising out of or in any way connected to the disclosure of my data. Such data will be used only for the purpose of complying with the City of Orlando's Building Energy & Water Efficiency Strategy (Ordinance 2016-64) and improving the energy efficiency of the building. MY SIGNATURE BELOW INDICATES THAT I HAVE READ AND VOLUNTARILY SIGNED THIS RELEASE AND WAIVER OF LIABILITY.  Signature of Customer of Record:  Date:								
Signature of Gueromer of Necotia.				Sato.				