

STATE OF TEXAS

§

COUNTY OF LUBBOCK

§

AUTHORIZATION FOR CO-APPLICANT

ACCOUNT HOLDER/CUSTOMER

I _____, as the original account holder for service located at _____, hereby authorize and request **Lubbock Power & Light** to add to my account _____ as a Co-Applicant. I understand that this authorization gives my co-applicant certain rights and responsibilities relating to my **Lubbock Power & Light** account including but not limited to bill payment and debt responsibilities, access to my account information including but not limited to individual contract terms and conditions, billing records, current charges, historical water and electrical usage, and the similar, and the ability to terminate service at the above location without my authorization. I am also aware that if my Co-Applicant decides to no longer be a Co-Applicant on my account and gives written notice to Lubbock Power & Light, I will be solely responsible for my account as far as Lubbock Power & Light is concerned.

Regarding my account information with **Lubbock Power & Light**, I understand that if I had previously requested this information be kept confidential under § 182.052 of the Texas Utility Code, or any other applicable statute, by signing this authorization, I am rescinding that request in so far as it applies to the above named party and granting **Lubbock Power & Light** the authority to release my customer information as outlined above.

CO-APPLICANT

I _____, agree to become a Co-Applicant on _____'s **Lubbock Power & Light** account for service located at _____. I understand that as a Co-Applicant, I have certain rights and responsibilities regarding this account including but not limited to billing and debt responsibilities such as payment for current and past due balances and fees and other expenses incurred prior to my becoming a Co-Applicant, the ability to terminate service at the above location without the original account holder's authorization, and

access to certain account information such as contract terms and conditions, current charges, billing records, and payment arrangements. I also understand that the original account holder also has these rights and responsibilities as well. I further understand that if I decide not to be a Co-Applicant after **Lubbock Power & Light** receives this signed form, I must **notify Lubbock Power & Light** in writing of my decision. I am also aware that once I am no longer a Co-Applicant, I will have none of the rights and responsibilities listed above in regards to **Lubbock Power & Light**, and any arrangements or agreements I may have made between myself and the original account holder, are solely between me and the Original Account Holder. By signing this authorization I also represent and warrant that I am the individual who is designated above as the Co-Applicant and that I am legally capable of making and executing this authorization.

Executed this _____ day of _____, 20__.

Customer Account Number

Customer Signature

Customer Name (typed or printed)

Service Address

Customer Social Security Number

Contact Phone Number

Customer Drivers License Number

Co-Applicant Signature

Co-Applicant Name (typed or printed)

Co-Applicant Social Security Number

Co-Applicant Drivers License Number