



electric choice

Customer Information Release Form MV-Web User ID and Password Request

Please fill out the form below ensuring that all sections are complete and accurate. Incomplete, inaccurate or illegible forms will be rejected. User IDs and Passwords will be released to customers named on the account ONLY. The customer is responsible for providing their password and ID to other interested parties. If you have multiple requests, please attach the Additional Accounts supplement to your release form with the required information. Upon completion, fax to **313.235.0531** or mail to Detroit Edison, Electric Choice Supplier Support Center, 2000 2nd Avenue, 332 WCB, Detroit, MI 48226-1279. **Your request will normally be processed within 10 business days.**

USER ID AND PASSWORD REQUESTED FOR:			
Customer/Company Name			
Service Address			
City	State	Zip	Customer Telephone Number
Detroit Edison Account Number		Detroit Edison Meter Number	

Pages of Additional Accounts Attached

PART 2 – CUSTOMER AUTHORIZATION AND RELEASE		
<p>I authorize Detroit Edison to release my User ID and Password for the account above. I release Detroit Edison from all claims, damages, or expenses of any kind resulting from unauthorized use of this information. I certify that I have the authority to release information for this account.</p>		
Customer Name (PLEASE PRINT)	Customer E-mail	
Authorized Signature	Fax Number	Date

FOR OFFICE USE ONLY	
<input type="checkbox"/> Processor Initials _____ <input type="checkbox"/> Processing Date _____	Reason for rejection: <input type="checkbox"/> Incomplete <input type="checkbox"/> Illegible <input type="checkbox"/> Invalid: Meter/Account _____ <input type="checkbox"/> Altered Form <input type="checkbox"/> Other
<p>ECSS Staff: please check boxes and initial and date before faxing form to customer.</p>	

