

Authorization for Release of Customer Account Information

Account Number: _____

Account Name: _____

I, _____, hereby authorize the Pennsylvania
(Requestor's Name)
Turnpike Commission its agents, and employees to release my E-ZPass customer account
information to _____, my agent in this matter. I
(New Agent's Name)
understand that this information is personal to me, and may include financial information,
including credit card and checking account information.

I agree to release and discharge the Pennsylvania Turnpike Commission from any and all
claims, demands, and causes of action for any damage or injury of any kind or nature caused
by, resulting from, arising out of, or occurring in connection with the above mentioned release of
E-ZPass customer account information to my agent.

I understand that this authorization will remain active and on file with the Pennsylvania
Turnpike Commission, until I have provided written instructions to revoke it.

Name of Additional Agent: _____
(New Agent's Name)

Title of Additional Agent: _____
(New Agent's Title)

Listed as:

Billing Contact: _____
Shipping Contact: _____
Equipment Contact: _____
Safety Contact: _____

New Contact Information:

Phone Number: _____
Fax Number: _____
E-mail Address: _____

Agent(s) to be removed from the account: _____

Signature of 3rd Party Witness
(Must **not** be New Agent's Signature)

Signature of Requestor
(Requestor **must** be authorized Contact)

Date of Request: _____