NEW BRUNSWICK ENERGY AND UTILITIES BOARD

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AUTHORIZATION FORM

Job Title:	
Organization:	
Phone:	
Preferred Method of Communication:(Facsimile or Email only)	
Facsimile No. or Email Address:	
Additional Individuals authorized to receive petrole include:	um product pricing information
Name:	Email Address:
1	
2	
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I hereby acknowledge and agree that I am duly authoricing information. I also acknowledge that the aboreceive the pricing information by email, at the addrerovide the Board with any change in contact information occurred.	ove-named individuals are entitled to ress provided. I further undertake to
Dated at, this day of	, 2006.
Name	