



## Audit Release Form

As an authorized signer for \_\_\_\_\_, I hereby release Sumerlan Management, Inc. (SUMERLAN) to obtain billing and account information for the following utility services:

☐ Electricity \_\_\_\_\_  
[Name of Provider]

☐ Natural Gas \_\_\_\_\_  
[Name of Provider]

☐ Water/Sewer \_\_\_\_\_  
[Name of Provider]

☐ Diesel Fuels \_\_\_\_\_  
[Name of Provider]

SUMERLAN shall use billing and account information for the sole purpose of pursuing refunds and bill reductions. Account information will remain confidential and will not be used for any other purpose other than that stated above.

\_\_\_\_\_  
[Print your name and title] [Phone] [Email]

\_\_\_\_\_  
[Print name and address of Organization(s)] [EIN]

\_\_\_\_\_  
[Your signature] [Date]