

AUTHORIZATION FOR RELEASE OF CUSTOMER ACCOUNT
INFORMATION

I, _____, hereby authorize the Pennsylvania Turnpike Commission, its agents and employees to release my E-ZPass customer account information to _____, my agent in this matter. I 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 abovementioned 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.

Witness

Signature

Date _____

Account # _____

Fax#: 717.565.4313