

Customer Requested De-Energization Authorization

To disconnect residential service when there is the possibility of overnight temperatures below 0°C and/or between the dates of **November 1** to **April 15**, the following waiver must be completed and submitted to **ATCO Gas** with the required electronic transaction request.

Site ID

Premise Address

Property Owner (*Please Print*)

I _____ (*Property Owner*),

acknowledge that I am aware of the impacts of this request and am solely responsible to protect this property, as well as **ATCO Gas** pipes and facilities at

_____ (*Premise Address*) on this

_____ day of _____ in _____, Alberta.

Signature

Please send completed forms by email: regulated@directenergy.ca