



My AEP account number(s) is: _____

I, _____, authorize American Electric Power to mail a pending disconnect notice to the following address:

Third Party Information

Name: _____

Address: _____

City: _____ St _____ Zip Code _____

Telephone Number _____ (Home) _____ (Work)

Signature of the AEP account holder authorizing the release of information:

Date: _____

For processing, please return this form to:

American Electric Power - Credit Policy & Payment Administration
PO Box 13447
Roanoke, VA 24034