

Letter of Authority

Company _____
 Reg/Charity No _____
 Business Address _____

 Postcode _____ Telephone Number _____
 Account Number _____
 MPAN(s)\MPR(s) _____

To Whom It May Concern:

I have appointed

Broker Name	Company Saving Expert Ltd		
Address	Melton Court, Gibson Lane		
	North Ferriby		
	East Yorkshire		
Postcode	HU14 3HH	Telephone Number	01482 764774

As part of the information gathering process this Brokerage may use the services of Online Direct Ltd. Online Direct Ltd are not an energy Broker but process contracts on behalf of this Brokerage and can issue termination as well as obtaining information about an account. By signing this agreement, you authorise Online Direct to access the information detailed below to support in the processing of your contract.

This Brokerage undertakes that it shall use the Customer data solely for the purposes of delivering the services specified in this document and may share that data with relevant third parties to do so.

Please tick the box to confirm you have read and understood the above

I have appointed this Brokerage to act on our behalf for the purpose of arranging our gas and /or electricity and / or water supply. I understand that I am under no obligation to accept any price quotation they may offer.

We hereby give authorisation that the above named can;

- Access industry held data including consumptions, contract end dates, metering information, issue termination notices should the need arise and opt out of future contract renewals on our behalf.
- Contact our current supplier to resolve any issues arising. Therefore they can request all billing information and authorise any adjustments, refunds or billing amendments.
- Raise and deal with complaints on our behalf to a satisfactory resolution. (The supplier will notify the customer if a complaint is raised on the account and confirm when this has been resolved).

I understand that by signing this LOA I am confirming I have the authority to agree to a credit check being carried out on the above named business. I also agree that where I have confirmed that I am a Director, Partner or Owner of the above-named business, I am agreeing to a personal credit check.

Please accept this LOA which is effective from the date below and which remains valid for a period of 12 months from this date. Please also note that this LOA supersedes all previous LOAs.

Signed _____
 Name _____
 Position _____
 Date _____