



Lee County Electric Cooperative, Inc.
Post Office Box 3455
North Fort Myers, FL 33918-3455
(239) 995-2121 • FAX (239) 995-7904
www.lcec.net

LCEC Commercial Account Authorization Form

For your protection, LCEC will be requiring additional information to help guard your identity. This measure is in accordance with federal regulatory requirements. To protect your account, you **MUST** fill out the “Choose Required Password” field below. This password will be required should you contact us to discuss the account.

To process your request for electrical service, please provide LCEC with the information below along with a copy of your W-9. Fax: 239-995-4287



I, _____, hereby authorize any person who provides the below password to manage my
(Owner or Registered agent on file—please print)
LCEC electric account, including, but not limited to, starting and stopping service. I am fully aware that all updates or changes made by such persons will be made on my behalf and will require password verification. I am also aware that it is my responsibility to notify LCEC of any changes of authorization. By signing this form, I take full responsibility for any activity on my LCEC account.

Date _____ Requested Date to Start Service: _____

Company Name _____ State of Registration _____

FEI/Tax ID # _____ Email address _____

LCEC Account Number or Customer Number _____

Choose Required Password _____ **Choose Password Hint** _____

Business Phone Number _____ Alternate Phone Number _____

Address to Connect Service _____

Name of current account holder or meter number: _____

Billing address if different from address above: _____

Owner’s or Registered Agent’s Signature _____