

## GAS TRACKING SYSTEM (GTS)

**Website Authorization Form** 

I authorize the following individual to access the Central Hudson Gas Tracking System (GTS) as Security Administrator. This user will have the ability to manage ESCO security, including the ability to add or remove users, and update ESCO contact information.

				dministrator e Administrator			
COMPANY NAME:				DUNS NUMBER:			
		GTS Use	r Contact	Information			
NAME:				PHONE:			
TITLE:				FAX:			
ADDRESS:			С	CITY:			
			STATE:		ZIP:		
EMAIL:							
				Authorized by:			
				Position:			
				Email:			
				Date:			
		Si	ubmit one f	orm per user			
	I	Email completed form to	Kathy Kilk				
	Office Use Only	☐Update User ID	Date 0	Completed:			
	10/28/2010	☐Update Contact Info	Comp	leted By:			