



A wholly owned subsidiary of Wright-Hennepin Cooperative Electric Association

Contact List Access Authority

Dealer Name: _____

Dealer Number: _____

Customer Name: _____

Customer Number: _____

*Place an "X" in the box

First Name	Last Name	User ID	Passcode	*Authority Level	
				<input type="checkbox"/>	All
				<input type="checkbox"/>	Limited
				<input type="checkbox"/>	Restricted
				<input type="checkbox"/>	All
				<input type="checkbox"/>	Limited
				<input type="checkbox"/>	Restricted
				<input type="checkbox"/>	All
				<input type="checkbox"/>	Limited
				<input type="checkbox"/>	Restricted
				<input type="checkbox"/>	All
				<input type="checkbox"/>	Limited
				<input type="checkbox"/>	Restricted
				<input type="checkbox"/>	All
				<input type="checkbox"/>	Limited
				<input type="checkbox"/>	Restricted
				<input type="checkbox"/>	All
				<input type="checkbox"/>	Limited
				<input type="checkbox"/>	Restricted

All Authority Level:	Open/close anytime, cancel alarm, authorize a schedule change, place entire customer on test, edit customer, and give out customer information.
Limited Authority Level:	Open/close anytime, cancel alarm, authorize a schedule change, place entire customer on test, and give out customer information.
Restricted Authority Level:	Open/close anytime, cancel alarm, and give out customer information.

Authorized by: _____

Date: _____