

**Sample letter from Client to Client Registry**

Letter must include Full Legal Name and Address for Company

Date:

Client Registry  
Alberta Department of Energy  
9945 108 ST Floor 9  
EDMONTON, AB  
T5K 2G6

FAX: (780) 422-9522

Re: Authorization of ETS Administrator(s) for Electronic Transfer System.

I hereby authorize (clients name here) to be the ETS Administrator and (clients name here) to be the Backup Administrator if any for (enter company name here).  
(Please provide ETS Account number if this is a change request)

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Authorized by: (Print name) (Print Title or Position)

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Signature

***Note: Replace underlined text above with ETS Administrator Name, Company Name.***