



Sussex Rural Electric Cooperative, Inc.

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A Touchstone Energy® Cooperative 
The power of human connections®

Date: _____

REQUEST TO REMOVE NAME FROM ACCOUNT

The account must have a zero balance, for this request to be in effect.

RE: Account # _____

By signing this document, I understand that my name, _____ will be removed from the account and hereby forfeit all capital credits earned on said account.

Signature: _____ Date: _____

Print Name: _____

Social Security #: _____

Date of Birth: _____

By signing this document, I understand that _____ will be removed from the referenced account and therefore, I am solely responsible for said account.

Signature: _____ Date: _____

Print Name: _____

Social Security #: _____

Date of Birth: _____