

**Establishment and Change of Account Password & Authorized People for Business Customers**

So that Copper Valley Telecom Employees are free to discuss and/or provide information to me during a call that I initiate to your business office, please establish or change the following security information for my account:

**Business Name on Account:** \_\_\_\_\_

**Telephone number(s):** \_\_\_\_\_

**Account Number(s):** \_\_\_\_\_

**Additional Authorized Contacts:** These are people who you authorize to gain information about and make changes to your accounts. They will be required to present the password below if requesting information over the phone. Please note the accounts that each of the following people are authorized to receive information on (you can find your account number on the top left corner of your printed bill).

**Authorized Person's Name** **Authorized Person's Email Address / Contact #**

Authorized Person's Name	Authorized Person's Email Address / Contact #

**Signature of Account Holder:** \_\_\_\_\_ **Date:** \_\_\_\_\_

Please Return this Form to: Copper Valley Telephone Co-Op (CVTC), PO Box 337 Valdez, AK 99686 or to our Business Office at 329 Fairbanks Street in Valdez or at Mile 188.5 Glenn Hwy in Glennallen.

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**(For Security Reasons, Items below this line should not be transmitted electronically – thank you)**

I wish to use this password for all accounts under this name: **(yes or no)**

**New Password: (minimum 8 digits w/ at least 3 #'s)**

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Should I forget or lose my password please use the following security question to verify my identity: **(select one)** to answer)

**What is your favorite color?** **Answer:** \_\_\_\_\_

**Who was your first employer?** **Answer:** \_\_\_\_\_

**What was your first car/vehicle?** **Answer:** \_\_\_\_\_

**Who is your best friend?** **Answer:** \_\_\_\_\_