

CUSTOMER USAGE INFORMATION AUTHORIZATION

I hereby authorize my utility to act in my behalf for the purpose of obtaining information about my historical energy usage and billing information and consent to the release of same so that the Company named herein may evaluate my energy usage patterns and make me an offer to supply energy. The utility considers all customer usage information to be confidential.

This authorization in no way binds me to the purchase of any service or product from the Company named herein and is to be used for the sole purpose of exclusively determining my offer price of service or the provision of other energy-related services.

Supplier/Consultant Information (please print):

(Individual) (Company)

Address _____

Email Address _____ Phone Number _____

Type of Data Requested (Electricity Only):

___ Sixty (60) minute interval data (if available) provided in ASCII text file

___ Monthly billing information (will be provided if 60 minute interval data is unavailable)

Please only fill out
this section

NOTE: Billing information will typically cover the most recent twelve-month period.

Operating Company Information (please print):

My Utility _____

Company Name _____

Address _____

City _____ State _____ Zip _____

Business Contact Name _____ Phone Number _____

Business Representative's Signature _____

Date _____

Account Number(s) (As shown on Latest Bill)

PLEASE FAX THIS AUTHORIZATION TO 816-268-0384