## **CUSTOMER LETTER OF AUTHORIZATION FORM**

(please complete one copy of this form for each electric distribution company)



We hereby authorize		ct on our behalf to secure historical electric usage information
	nt Service Provider	
	_	energy usage patterns and other relevant information for the
provision of energy related service	es. This authorization will re	emain in effect for twenty-four (24) months or until we
provide	with thirty (30) day	ys advance written notice of termination of the authorization,
whichever is earlier	will tro	eat all historical electric usage information obtained under this
Curtailment	Service Provider	eat all historical electric usage information obtained under this
authorization as confidential information		
This form must be completed in it or other legal right to sign the cus		e customer of record or by someone who has power of attorney alf.
Customer Signature		Date
CUSTOMER NAME		
OWNER OR JOB TITLE IF FOR BUSINESS		
CUSTOMER PHONE	FAX	CUSTOMER EMAIL
BUSINESS NAME		
CUSTOMER ADDRESS		
FIRSTENERGY CO. (OHIO EDISON, WEST	PENN POWER, ETC.)	
20-DIGIT CI	USTOMER NUMBER(S) (A	AS SHOWN ON PAGE 3 OF LATEST BILL)
Please attach cus	stomer numbers or include	electronic list if requesting more than 5 accounts.
	completed for and one utility	ity bill for each electric distribution company e at
2.3322.116.60	, 22222222	Curtailment Service Provider

Curtailment Service Providers and Conservation Service Providers (Pennsylvania only) should return completed Customer Letter of Authorization forms to csprequests@firstenergycorp.com.