

# CUSTOMER LETTER OF AUTHORIZATION FOR RELEASE OF PERSONAL INFORMATION FORM - OH

**FirstEnergy**

(please complete one copy of this form for each electric utility company)  
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I hereby authorize \_\_\_\_\_ to obtain my historical hourly  
Curtailment Service Provider  
customer energy usage data for the provision of energy related services,  
including but not limited to enrollment in demand response programs. This  
authorization will remain in effect for twenty-four (24) months or until I provide  
\_\_\_\_\_ or \_\_\_\_\_ with thirty (30)  
Curtailment Service Provider Electric Utility Company  
days advance notice of termination of the authorization whichever is earlier.  
will treat all historical hourly customer energy  
Curtailment Service Provider  
usage data obtained under this authorization as confidential information.

*This form must be completed in its entirety and signed by the customer of record or by their legally authorized representative.*

**I realize that under the rules and regulations of the Public Utilities Commission of Ohio, I may refuse to allow \_\_\_\_\_**  
Electric Utility Company  
**to release the information set forth above. By my electronic or written signature, I freely give \_\_\_\_\_ permission to**  
Electric Utility Company  
**release the information designated above.**

Customer Signature

Date

PRINTED NAME		
COMPANY NAME (for Business Accounts)		
CUSTOMER PHONE	FAX	CUSTOMER EMAIL
CUSTOMER ADDRESS		
FIRSTENERGY UTILITY CO. (OHIO EDISON, TOLEDO EDISON, OR THE ILLUMINATING CO.)		

# **CUSTOMER LETTER OF AUTHORIZATION FOR RELEASE OF PERSONAL INFORMATION FORM - OH**



(please complete one copy of this form for each electric distribution company)  
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**20-DIGIT CUSTOMER NUMBER(S)  
(AS SHOWN ON PAGE 3 OF LATEST BILL)**

Return this completed form and one utility bill for each customer number provided above to your account representative at

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Curtailment Service Provider