

CUSTOMER NAME _____ PHONE NUMBER _____

CUSTOMER ADDRESS _____

CITY _____ STATE _____ ZIP CODE _____

AUTHORIZED PERSON/TITLE _____

ACCOUNT/SDI NUMBER _____

For multiple account/SDI numbers, please attach a spreadsheet in Microsoft Excel format containing the accounts/SDI(s) for which you are requesting usage.

Competitive Retail Electric Service (CRES) Provider (Includes Brokers, Power Marketers)

CRES NAME _____ PHONE NUMBER _____

ADDRESS _____

E-MAIL ADDRESS _____

Initial Box for release of specific account information to CRES provider listed above:

Account/SDI Number Release: The above named customer authorizes the release of their Account Number/Service Delivery Identification Number. This information is to be used for one or all of the following: enrollment in a product or service; and/or obtaining usage data for pricing of a product or service.

Residential, Interval Historical Energy Usage Data Release:

The above named residential customer authorizes the release of up to 24 months of _____ kwh data, if available (Please fill in the blank with your request, e.g., Hourly, 30-minute, 15-minute, etc.). This information is to be used for pricing of a product or service.

I realize that under the rules and regulations of the Public Utilities Commission of Ohio, I may refuse to allow (Choose Your Provider) to release the information set forth above. By my signature, I freely give (Choose Your Provider) permission to release the information designated above.

Signature

Date

This authorization will expire one year from the date of the customer signature or on the date listed below.

Expiration Date: _____.