

Customer Usage Information Authorization Form

(Non-Residential)



Return via facsimile to 610-667-2208 - Attention: Jennifer Mongone

NY

If you have any questions, please contact Jennifer Mongone at 610-664-8299 Ext. 1305

The undersigned ("Customer") authorizes NewEnergy to obtain and review the following information from the local distribution utility: consumption history; billing determinants; credit information; public assistance status; and information pertaining to PSL § 33, tax status and eligibility for economic development or other incentives. This information may be used by NewEnergy to determine whether it will commence and/or continue to provide energy supply service to Customer and will not be disclosed to a third-party unless required by law. Customer's execution of this form shall constitute authorization for the release of this information to NewEnergy. This authorization will remain in effect for one year from or for as long as an energy supply service agreement exists between Customer and NewEnergy. **Customer may rescind this authorization at any time by providing written notice to NewEnergy or calling NewEnergy at 1-888-262-4648.**

SUPPLIER INFORMATION (please print):

CNE Contact Name (Individual): Shaun Bodrog

Representing (Company): Constellation NewEnergy

Address: 810 7th Ave, Suite 400

E-mail Address: shaun.bodrog@constellation.com Phone Number: 347-463-1319

Type of Data Requested (select one): Sixty (60) minute interval data (if available) provided in ASCII text file

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

NOTE: Billing information will typically cover the most recent 12-month period.

COMPANY INFORMATION (please print):

My Utility: _____

My Company's Name: _____

Address: _____

City: _____ State: _____ Zip Code: _____

Business Contact Name: _____ Phone Number: _____

Party other than customer to be billed, if allowed by your utility: _____

Signature: _____ Date: _____

I spend approximately \$ _____ on electricity each month.

Account Number(s) as shown on last bill: _____
