



CUSTOMER USAGE INFORMATION AUTHORIZATION FORM (Non-Residential)

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 90 days from or for as long as an energy supply service agreement exists between Customer and NewEnergy; provided, **Customer may rescind this authorization at any time by providing written notice to NewEnergy or calling NewEnergy at 1-888-262-4648.**

Supplier/Consultant Information (please print):

Ed Brolin representing Constellation NewEnergy
(Individual) (Company)
Address 810 Seventh Avenue, Suite 400, New York, NY 10019

Email Address Ed.Brolin@constellation.com Phone Number (212) 885-6400

Type of Data Requested (select one):

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)

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

Company Information (please print):

My Utility _____

My Company's Name _____

Address _____

City _____ State _____ Zip _____

Business Contact Name _____ Telephone Number () _____

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

Business Representative's Signature Date

I spend approximately \$ _____ on electricity each month.

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

**PLEASE FAX THIS AUTHORIZATION
212-883-6101**