AUTHORIZATION TO: RECEIVE CUSTOMER INFORMATION OR ACT ON A CUSTOMER'S BEHALF

SUBMITTED TO THE FOLLOWING.				
Please check all that apply:				
☐ PG&E	☐ SoCalGas			
SCE	SDG&E			

THIS IS A LEGALLY BINDING CONTRACT—READ IT CAREFULLY (Please Print or Type)

•,	NAME TITLE (IF APPLICABLE		ICABLE		
of			(Customer) have the fo	ollowing mailing address	
	NAME OF CUSTOMER OF RECORD				
				, and do hereby appoint	
	MAILING ADDRESS	CITY	STATE ZIP		
	Center for Sustainable Energy of 3980 Sherman Street, Suite 170				
	· · · · · · · · · · · · · · · · · · ·				
	San Diego CITY		CA STATE	92110 ZIP	
to act a	s my agent and consultant (Agent) for	the listed accou	nt(s) and in the categories i	ndicated below:	
ACCOU	NTS INCLUDED IN THIS AUTHORIZAT	ION:			
1.					
SE	RVICE ADDRESS	CITY	SER	VICE ACCOUNT NUMBER	
2	RVICE ADDRESS	CITY	SER	VICE ACCOUNT NUMBER	
3.	DWOT ADDRESS	CITY	050	VICE ACCOUNT NUMBER	
SE	RVICE ADDRESS	CITY	SER	VICE ACCOUNT NUMBER	
(For more	than three accounts, please list additional account	ts on a separate sheet	t and attach it to this form)		
INFORMATION, ACTS AND FUNCTIONS AUTHORIZED – This authorization provides authority to the Agent. The Agent must thereafter provide specific written instructions/requests (e-mail is acceptable) about the particular account(s) before any information is released or action is taken. In certain instances, the requested act or function may result in cost to you, the customer. Requests for information may be limited to the most recent 12-month period.					
	mer) authorize my Agent to act on my icable boxes):	behalf to perfor	m the following specific act	s and functions (<u>initial</u>	
		 Request and receive billing records, billing history and all meter usage data used for bill calculation for all of my account(s), as specified herein, regarding utility services furnished by the Utility¹. 			
	2. Request and receive copies of corresp	. Request and receive copies of correspondence in connection with my account(s) concerning (initial all that apply):			
	 a. Verification of rate, date of rate change, and related information; b. Contracts and Service Agreements; c. Previous or proposed issuance of adjustments/credits; or d. Other previously issued or unresolved/disputed billing adjustments. 				
	3. Request investigation of my utility bill(Request investigation of my utility bill(s).			
	4. Request special metering, and the rigl	Request special metering, and the right to access interval usage and other metering data on my account(s).			
	5. Request rate analysis.				
	Request rate changes.				
		Request and receive verification of balances on my account(s) and discontinuance notices			

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¹ The Utility will provide standard customer information without charge up to two times in a 12-month period per service account. After two requests in a year, I understand I may be responsible for charges that may be incurred to process this request.

AUTHORIZATION TO: RECEIVE CUSTOMER INFORMATION OR ACT ON A CUSTOMER'S BEHALF

ACT ON	MY BEHALF ON THE FOLLOWING BASIS ² (init period is specified, authorization will be limited to a one	e-time authorization e request for information and/or the acts and functions specified			
		n and/or for the acts and functions specified above will be thin the twelve-month period from the date of execution of this			
	duration to three years from the date of execution	with the date of execution until _07/20/2025_ (Limited in a.) Requests for information and/or for the acts and functions each time requested within the authorization period specified			
RELEAS	SE OF ACCOUNT INFORMATION:				
	ity will provide the information requested above preferred format is (check all that apply):	e, to the extent available, via any one of the following. My			
⊠ H	Hard copy via US Mail (if applicable).				
⊠ F	Facsimile at this telephone number: 858-244-1178				
	Electronic format via electronic mail (if applicable) to this e-mail address: sgip@energycenter.org				
of Record that my A and perf authorizatelease the matters life of action 2) the urangement of action 2) the urangement of action 2 request.	d listed at the top of this form and that I have author Agent has authority to act on my behalf and request form the specific acts and functions listed above ation request submitted before releasing information he requested information on my account or facilities isted above. I hereby release, hold harmless, and , damages, or expenses resulting from: 1) any releast hauthorized use of this information by my Agent; ation, including rate changes. I understand that I me	authorized to execute this document on behalf of the Customer ority to financially bind the Customer of Record. I further certify at the release of information for the accounts listed on this form in the release of information for the accounts listed on this form in the release of information on my behalf. I authorize the Utility to est to the above Agent who is acting on my behalf regarding the indemnify the Utility from any liability, claims, demands, causes ease of information to my Agent pursuant to this Authorization; and 3) from any actions taken by my Agent pursuant to this nay cancel this authorization at any time by submitting a written has authority to financially bind the customer (for example,			
	AUTHORIZED CUSTOMER SIGNATURE	TELEPHONE NUMBER			
Execute	d this day of	at CITY AND STATE WHERE EXECUTED			
damages		he Utility from any liability, claims, demand, causes of action, ner information obtained pursuant to this authorization and from ding rate changes.			
AGENT SIG	CNATURE	858-244-1177 TELEPHONE NUMBER			
	or Sustainable Energy	LELEPHONE NUMBER			
COMPAN	Y				
Execute	d thisday of				

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