## **COLLECTIVE BILLING CHANGE REQUEST**

FOR ADDITIONAL ACCOUNT INFORMATION FORM NO. X-2526.9 (REV. 02-23)



ACCOUNT NAME 1				DATE		
ACCOUNT NAME 2	2			COLLECTIVE BILLING ACCOUNT NO.		
STREET ADDRESS						
CITY			STATE		ZIP CODE	
PLEASE CHECK O	NE					
☐ MAKE CHANGES TO COLLECTIVE BILLING ACCOUNT ☐ DISCONTINUE COLLECTIVE BILLING ACCOUNT						
CHANGE IN COLLECTIVE BILLING ADDRESS						
STREET ADDRESS						
CITY					ZIP CODE	
CHANGE IN CONTACT INFORMATION						
CONTACT NAME			TITLE	TITLE		
CONTACT PHONE	NO.		CONTACT FAX NO.			
Custome	rs Served by:	Potomac Edison <sup>®</sup> , please return your completed application to:	Email: collective_applications@firstenergycorp.com Fax No.: 330-315-9758			
**email only monitored for collective applications/changes						
CUSTOMER REQUEST TO CHANGE COLLECTIVE BILLING AGREEMENT						
The parties to the above Collective Billing Account hereby amend the Agreement by adding/removing the following detail account(s) to/from the terms of the Agreement.						
The minimum number of detail accounts is 10, the maximum is 250. Any accounts that are added to collective billing will have their meter reading dates modified to align with existing accounts on the collective bill.						
TYPE OF	CHANGE	DETAIL ACCOUNT NO	SERVICE ADDRESS			
ADD	REMOVE	DETAIL ACCOUNT NO.		SERVICE A	ADDRESS	
TO BE COMPLETED BY FIRSTENERGY ONLY						
NAME OF EMPLOY	EE SUBMITTING O	CHANGE			DATE SUBMITTED	