

Potomac Edison – Community Solar Program Subscriber Organization Customer Usage Information Authorization

Subscriber Organization Information (please print):

Name: _____

Address: _____

City: _____ State: _____ Zip Code: _____

Email: _____ Phone: () _____

Subscriber Organization ID Number: _____

Interconnection GEN Number: _____

12 Months of historical monthly consumption (kWh) will be provided for the customer(s) reflected below

20 Digit Customer Number(s):

_____	_____
_____	_____
_____	_____
_____	_____
_____	_____

I hereby authorize my electric utility to act on my behalf to obtain my historical energy usage and consent to the release of same. Customer usage information is considered confidential.

Subscriber Organization Representative's Signature

Date

This authorization is valid for 90 days from the above date.