

Instructions for Completing Form 79-1095: PG&E's Authorization to Receive Customer Information or Act on a Customer's Behalf

Purpose of This Form

Fifteen-minute interval data recorded by PG&E revenue meters are integral and essential to ADR Program application and participation. The data are collected for the following purposes:

- verify customer's eligibility to participate,
- inform and verify engineering calculations of the kW load shed potential based on ADR strategies developed with the customer,
- reserve the ADR incentives for the project application based on the calculated kW load shed,
- support post-installation inspection and system testing, and
- calculate performance incentive payment after the first completed demand response season.

To protect customer privacy, PG&E requires that customers explicitly authorize the sharing of their meter data with non-PG&E employees. By completing this form, the customer allows PG&E to share only their meter account and data with Energy Solutions and ASWB Engineering (ADR Team) and designate their PG&E representative (Business Energy Services representative) to share data with ADR Team on the customer's behalf. These permissions allow ADR Team to process applications and implement the ADR Program for PG&E.

Who Must Complete this Form

Customers who receive electric service from PG&E must complete and sign this form. Project sponsors, aggregators, and other contractors hired by customer to support the application process and project installation cannot authorize meter data sharing on customers' behalf. If the customer has completed this form for ADR Program before but the authorization timeline has passed, the customer needs to fill out the form again to renew or extend the authorization.

Instructions

Please see also SAMPLE Authorization to Receive Customer Usage Information Form attached to these instructions. The SAMPLE form shows line numbers referenced by these instructions

below.

1. Customer completes lines 1-3 & 6-16

- Lines 1-3: Customer Information
- Lines 6-8: Service Address information. If more than 3 accounts, please attach a separate table or excel spreadsheet to list each service address and service account number.
- Lines 9-15: Information and Agent Authorization. Initial lines 9, 12, and 13, plus additional authorizations as desired.
- Line 18: Authorization timeline: Make sure box in lines 9 and 12 are initialed. Please contact ADR team if there are reasons the customer wants to end data access early
- Line 21: Release of account information: check box of line 21 is checked to authorize PG&E to share meter data with ADR Team. The e-mail address in line 21 is the ADR Team e-mail address, do not change.
- Line 22: Complete customer name
- Lines 23-24: Customer signature, signature date, phone, and address. Note, vendors and contractors working for the customer cannot sign this form.

2. ADR Team Information, lines 4-5 & 21

- Lines 4-5: ADR Team information is auto-filled in the form. Leave as-is.
- Line 21: ADR Team e-mail is auto-filled in the form. This must remain as TOkeefe@energy-solution.com to allow ADR Team access.
- Line 25: Agent signature. Your ADR Team lead signature.

EXAMPLE



AUTHORIZATION TO RECEIVE CUSTOMER INFORMATION OR ACT UPON A CUSTOMER'S BEHALF

THIS IS A LEGALLY BINDING CONTRACT, PLEASE READ CAREFULLY

(Please Print or Type)

Line 1 I, Jane Smith Ranch Manager
NAME TITLE (IF APPLICABLE)

2 of Fine Orchards (Customer) have the following mailing address
NAME OF CUSTOMER OF RECORD

3 1234 Ranch Way Fertile Town CA 99999, and do hereby appoint
MAILING ADDRESS CITY STATE ZIP

4 Tim O'Keefe (Energy Solutions) of 449 15th Street
NAME OF THIRD PARTY MAILING ADDRESS

5 Oakland CA 94612
CITY STATE ZIP

To act as my agent and consultant (Agent) for the listed account(s) and in the categories indicated below:

ACCOUNTS INCLUDED IN THIS AUTHORIZATION:

6 1. SW SW NW 21 15 28 1123456789
SERVICE ADDRESS CITY SERVICE ACCOUNT NUMBER

7 2. 678 Green Acres Lane Fertile Town 9987654321
SERVICE ADDRESS CITY SERVICE ACCOUNT NUMBER

8 3. See attached spreadsheet for full list
SERVICE ADDRESS CITY SERVICE ACCOUNT NUMBER

(For more than three accounts, please list additional accounts on a separate sheet 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.

I (Customer) authorize my Agent to act on my behalf to perform the following specific acts and functions (initial all applicable boxes):

9 Initial JS 1. 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.

10 2. 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.

11 3. Request investigation of my utility bill(s).

Initial JS 4. Request special metering, and the right to access interval usage and other metering data on my account(s).

Initial JS 5. Request rate analysis.

14 6. Request rate changes.

15 7. Request and receive verification of balances on my account(s) and discontinuance notices.

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

I (CUSTOMER) AUTHORIZE THE RELEASE OF MY ACCOUNT INFORMATION AND AUTHORIZE MY AGENT TO ACT ON MY BEHALF ON THE FOLLOWING BASIS² (initial one box only):

²If no time period is specified, authorization will be limited to a one-time authorization

16 One time authorization only (limited to a one-time request for information and/or the acts and functions specified above at the time of receipt of this Authorization).

17 One year authorization - Requests for information and/or for the acts and functions specified above will be accepted and processed each time requested within the twelve month period from the date of execution of this Authorization.

Initial JS Authorization is given for the period commencing with the date of execution until 10/31/2020 (Limited in duration to three years from the date of execution.) Requests for information and/or for the acts and functions specified above will be accepted and processed each time requested within the authorization period specified herein.

RELEASE OF ACCOUNT INFORMATION:

The Utility will provide the information requested above, to the extent available, via any one of the following. My (Agent) preferred format is (check all that apply):

19 Hard copy via US Mail (if applicable).

20 Facsimile at this telephone number: _____

21 Electronic format via electronic mail (if applicable) to this e-mail address: tokeefe@energy-solution.com

22 I (Customer), Jane Smith (print name of authorized signatory), declare under penalty of perjury under the laws of the State of California that I am authorized to execute this document on behalf of the Customer of Record listed at the top of this form and that I have authority to financially bind the Customer of Record. I further certify that my Agent has authority to act on my behalf and request the release of information for the accounts listed on this form and perform the specific acts and functions listed above. I understand the Utility reserves the right to verify any authorization request submitted before releasing information or taking any action on my behalf. I authorize the Utility to release the requested information on my account or facilities to the above Agent who is acting on my behalf regarding the matters listed above. I hereby release, hold harmless, and indemnify the Utility from any liability, claims, demands, causes of action, damages, or expenses resulting from: 1) any release of information to my Agent pursuant to this Authorization; 2) the unauthorized use of this information by my Agent; and 3) from any actions taken by my Agent pursuant to this Authorization, including rate changes. I understand that I may cancel this authorization at any time by submitting a written request. [This form must be signed by someone who has authority to financially bind the customer (for example, CFO of a company or City Manager of a municipality).]

23 _____ (123) 456-7890
AUTHORIZED CUSTOMER SIGNATURE TELEPHONE NUMBER
24 Executed this 2 day of 5 2017 at Fertile Town, CA
MONTH YEAR CITY AND STATE WHERE EXECUTED

I (Agent), hereby release, hold harmless, and indemnify the Utility from any liability, claims, demand, causes of action, damages, or expenses resulting from the use of customer information obtained pursuant to this authorization and from the taking of any action pursuant to this authorization, including rate changes.

25 _____ 510-482-4420
AGENT SIGNATURE TELEPHONE NUMBER
26 Energy Solutions
COMPANY

27 Executed this 8 day of 5 2017
MONTH YEAR