



**Commercial Electricity and Natural Gas Supply Services Cooperative  
Program Application**

**AUTHORIZATION TO OBTAIN BILLING, PAYMENT HISTORY,  
ACCOUNT SERVICE DATA, AND CREDIT DATA**

**“Customer” Location:**

Legal “Customer” Name: \_\_\_\_\_

Address: \_\_\_\_\_

City: \_\_\_\_\_

State: \_\_\_\_\_

Zip: \_\_\_\_\_

**Authorized “Customer” Representative (the person signing the contract):**

Name: \_\_\_\_\_ Title: \_\_\_\_\_

Phone Number: \_\_\_\_\_ Fax Number: \_\_\_\_\_

Email Address: \_\_\_\_\_

Cell phone or alternate contact number (day of bid): \_\_\_\_\_

**Alternate “Customer” Representative:**

Name: \_\_\_\_\_ Title: \_\_\_\_\_

Phone Number: \_\_\_\_\_ Fax Number: \_\_\_\_\_

Email Address: \_\_\_\_\_

Cell phone or alternate contact number (day of bid): \_\_\_\_\_

**Credit References:** Bank Reference: \_\_\_\_\_

Trade Reference: \_\_\_\_\_

Year Business was Established: \_\_\_\_\_

Has the "Customer" filed for bankruptcy within the last five years? \_\_ Yes \_\_ No

**AUTHORIZATION:**

**Customer's Dun & Bradstreet Number:** \_\_\_\_\_ (optional)

The "Customer" hereby authorizes the local Energy Distribution Company (EDC) BGE, PEPCO, Allegheny Power, Delmarva Power, Washington Gas to permit the authorized "Licensed Electricity and/or Natural Gas Service Supplier" to directly receive "Customers" most recent twenty-four (24) months electric/natural gas account data and twelve (12) months of payment history for the Account Numbers with meters located at the address shown on ATTACHMENT A. The electric/natural gas billing information may include information on service configuration and descriptions of previous energy use. The authorized "Licensed Electricity and/or Natural Gas Service Supplier" has the right to use the information provided and to retain the information in its files, and disclose it to any authorized employee, agent, or representative. The authorized "Licensed Electricity and/or Natural Gas Service Supplier" hereby agrees not to sell or otherwise disclose said information to any third party not authorized in writing by "Customer", for the purposes of such third party marketing to, or soliciting business from "Customer".

"Customer" hereby authorizes "Licensed Electricity and/or Natural Gas Service Supplier" to process this Authorization for credit review and approval. All information provided will be held in strict confidence and used only by "Licensed Electricity and/or Natural Gas Service Supplier" or its affiliates, in making its credit evaluation.

THE UNDERSIGNED HEREBY CERTIFIES THAT THE SIGNATOR IS AN AUTHORIZED REPRESENTATIVE OF THE "CUSTOMER" AND THAT THE INFORMATION PROVIDED HEREIN IS TRUE, CORRECT AND ACCURATELY REFLECTS THE "CUSTOMER" CURRENT BUSINESS CONDITION.

**On behalf of "Customer":**

Signed: \_\_\_\_\_ Date: \_\_\_\_\_  
"Customer" Authorized Representative

Name: \_\_\_\_\_ Title: \_\_\_\_\_

<p><u>Data in this box is to be filled in by the Suppliers</u></p> <p>THE UNDERSIGNED HEREBY CERTIFIES THAT THE SIGNATOR IS AN AUTHORIZED REPRESENTATIVE OF THE "LICENSED ELECTRICITY AND/OR NATURAL GAS SERVICE SUPPLIER" AND AGREES TO THE CONDITIONS OF THIS AUTHORIZATION.</p> <p><b>On behalf of the "Licensed Electricity and/or Natural Gas Service Supplier":</b></p> <p>Signed: _____ "Licensed Electricity and/or Natural Gas Service Supplier" Representative or Agent</p> <p>Company Name: _____</p> <p>Name: _____ Title: _____</p> <p>Date: _____</p>
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**ATTACHMENT – A**  
**ELECTRICITY ACCOUNTS**

Location Name: \_\_\_\_\_

Location Address: \_\_\_\_\_

Town \_\_\_\_\_ State \_\_\_\_\_ Zip Code \_\_\_\_\_

Account Number: \_\_\_\_\_ Account Number: \_\_\_\_\_

Account Number: \_\_\_\_\_ Account Number: \_\_\_\_\_

Account Number: \_\_\_\_\_ Account Number: \_\_\_\_\_

Account Number: \_\_\_\_\_ Account Number: \_\_\_\_\_

Account Number: \_\_\_\_\_ Account Number: \_\_\_\_\_

Account Number: \_\_\_\_\_ Account Number: \_\_\_\_\_

**Are your accounts in a supply contract with a third party supplier?**

\_\_\_\_ Yes \_\_\_\_ No

**If Yes:** Who is the supplier? \_\_\_\_\_

What is the current contract termination METER READ DATE \_\_\_\_\_

Applicant **must** include a copy of the current signed contract with this Application

**If you have, any Residential Electric or Natural Gas accounts please visit [www.coop.cqiassociates.com](http://www.coop.cqiassociates.com) to enroll today for no additional fee.**

*CQI Associates, LLC is not liable for any fees or penalties incurred by not providing accurate information above. It is critical to provide all the necessary information if you are in a current electricity or natural gas commercial supply service contract and to provide all the information requested above. "Customer" can be subjected to penalties and fees by your current or future third party electricity or natural gas supplier if you were to enroll into electricity or natural gas contract before your contract ends with your current third party supplier. By submitting this application, all the above information is correct. CQI Associates representing the Commercial Energy Purchasing Program is not liable for any fees or penalties from your current or future third party electricity supply company if applicable.*

**NATURAL GAS ACCOUNTS**

Location Name: \_\_\_\_\_

Location Address: \_\_\_\_\_

Town \_\_\_\_\_ State \_\_\_\_\_ Zip Code \_\_\_\_\_

Account Number: \_\_\_\_\_ Account Number: \_\_\_\_\_

Account Number: \_\_\_\_\_ Account Number: \_\_\_\_\_

Account Number: \_\_\_\_\_ Account Number: \_\_\_\_\_

Account Number: \_\_\_\_\_ Account Number: \_\_\_\_\_

Account Number: \_\_\_\_\_ Account Number: \_\_\_\_\_

Account Number: \_\_\_\_\_ Account Number: \_\_\_\_\_

**Are your accounts in a supply contract with a third party supplier?**

\_\_\_\_ Yes \_\_\_\_ No

**If Yes:** Who is the supplier? \_\_\_\_\_

What is the current contract termination METER READ DATE \_\_\_\_\_

Applicant **must** include a copy of the current signed contract with this Application

**If you have any Residential Electric or Natural Gas accounts please visit [www.coop.cqiassociates.com](http://www.coop.cqiassociates.com) to enroll today for no additional fee.**

*CQI Associates, LLC is not liable for any fees or penalties incurred by not providing accurate information above. It is critical to provide all the necessary information if you are in a current electricity or natural gas commercial supply service contract and to provide all the information requested above. "Customer" can be subjected to penalties and fees by your current or future third party electricity or natural gas supplier if you were to enroll into electricity or natural gas contract before your contract ends with your current third party supplier. By submitting this application, all the above information is correct. CQI Associates and the Commercial Energy Purchasing Program are not liable for any fees or penalties from your current or future third party electricity supply company if applicable.*

**APPLICATION FEES:**

New Applicant:

Electricity \$100.00

Natural Gas included

Renewal Applicant:

Electricity \$100.00

Natural Gas included

The application fee covers all commercial electricity, natural gas or renewal accounts for as many locations as applicable at the time of the application.

**Make Checks Payable to:**

**Carroll County Chamber of Commerce**

9 East Main Street

Suite #105

Westminster, MD 21157

**Terms and Conditions**

*Participation in the Cooperative **REQUIRES** continuous membership in the Chamber of Commerce during the full term of the Agreement. If your membership is not current with the Chamber, you must bring your account current to participate. Submission of the application for participation in the cooperative does not include fees for membership in the Chamber. If your membership is not current, the application for cooperative participation will not be processed.*

*The Applicant/Customer understands that this application is for a new and renewal electricity and or natural gas supply services contract obtained through the Commercial Energy Cooperative Program and CQI Associates. Market prices and regulations impact the terms, time, and rates of the supplier offer. The contract offer prices will be based on current market conditions. The current "Standard Offer Rates" are used as the "price to compare" or "benchmark price" to determine if a supplier's offer is economically viable.*

*A period of time could elapse from the date this Application is submitted and the time when market rates are at a point where a price offer will be recommended that is lower than the current or projected utility company "Standard Offer Rates".*

*The Applicant/Customer understands and agrees that the suppliers will review credit and payment history data to determine if they will serve the designated accounts. The decision on credit and service is at the sole determination of the selected supplier. The Applicant/Customer assures CQI Associates, and the selected supplier that they are not in a current supply services contract that would prohibit enrollment into the new contract offered. If customer is in a third party contract, all data, copy of contract and contract end date is to be provided for proper transition from one contract to the next in this application. The Applicant understands that they assume full responsibility for any fees or penalties incurred as a result of not providing necessary information requested in this application.*

*The Applicant/Customer agrees that they will make a decision on the day contracts are offered to accept or reject the offer. The Applicant/Customer understands that the timeframe could be less than four hours to make the decision. The Applicant/Customer understands that the potential suppliers will conduct credit verification and can elect to not issue a contract due to credit review. The participation fee is non-refundable even if credit is denied. The term cooperative is being used to express that the program is an aggregation purchasing program connecting applicant with a supplier in accordance with the regulations permitting customer choice.*

Signature of the Applicant/Customer: \_\_\_\_\_

Title: \_\_\_\_\_ Date: \_\_\_\_\_

Amount Enclosed: \_\_\_\_\_ Check Number: \_\_\_\_\_