



Electricity and Natural Gas Supply Services

AUTHORIZATION & APPLICATION FORM

ELECTRIC AND NATURAL GAS BILLING, PAYMENT HISTORY, ACCOUNT SERVICE DATA, AND CREDIT DATA SUPPLIER AUTHORIZATION

“Customer” Location:

Legal “Customer” Name: _____

Address: _____

City: _____

State: _____

Zip: _____

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

Name: _____ Title: _____

Phone Number: _____ Email Address: _____

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

Alternate “Customer” Representative:

Name: _____ Title: _____

Phone Number: _____ Email Address: _____

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

Credit References: Bank Reference: _____

Trade Reference: _____

Has the “Customer” filed for bankruptcy within the last five years? __ Yes __ No

AUTHORIZATION:

The "Customer" hereby authorizes the local Energy Distribution Company (EDC) to permit authorized "Licensed Electricity and/or Natural Gas Service Suppliers" to directly receive "Customer's" most recent twenty-four (24) months electric/natural gas account data and twelve (12) months of payment history for the Account Numbers with meters as shown on the ATTACHMENT A. The authorized "Licensed Electricity and/or Natural Gas Service Suppliers" have 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 Suppliers" hereby agree 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 Suppliers" 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.

"Customer" hereby authorizes and designates CQI Associates, LLC as the exclusive authorized representative for the management of Customer's electricity distribution, electricity supply services, natural gas supply, gas supply transportation, and related procurement and account enrollment services. This authorization in no way binds "Customer" to the purchase of a supply service and is to be used for the sole purpose of determining an offer price and selecting a supplier for electricity or natural gas supply services.

"Customer" hereby authorizes the "Licensed Electricity and/or Natural Gas Service Suppliers" to deal directly with CQI Associates, LLC representatives on any and all matters pertaining to the collection of account data, to receive pricing and receiving Agreements as it pertains to "Customer's" electricity and natural gas procurement information, in order for CQI Associates, LLC to manage and evaluate the electricity and/or natural gas pricing requests.

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

On behalf of "Customer":

Signed: _____ Date: _____
"Customer" Authorized Representative

Name: _____ Title: _____

Data in this box is to be filled in by the Suppliers

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.

On behalf of the "*Licensed Electricity and/or Natural Gas Service Supplier*":

Signed: _____
"Licensed Electricity and/or Natural Gas Service Supplier"
Representative or Agent

Company Name: _____

Name: _____ Title: _____ Date: _____

CQI Associates, LLC is licensed as a buyer's broker/consultant in the State of Maryland:

Electricity: License # IR-575

Natural Gas: License # IR-1753

ATTACHMENT - A

ELECTRICITY ACCOUNTS

Location Name: _____

Location Address: _____

City/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: _____

Account Number: _____ Account Number: _____

Account Number: _____ Account Number: _____

Account Number: _____ Account Number: _____

Submit One Copy of your current local utility distribution company bill, all pages, for each account number shown above with your Application

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 _____

If Yes, Submit a copy of the current signed contract with your Application

NATURAL GAS ACCOUNTS

Location Name: _____

Location Address: _____

City/Town _____ State _____ Zip Code _____

Account Number: _____ Account Number: _____

Account Number: _____ Account Number: _____

Account Number: _____ Account Number: _____

Account Number: _____ Account Number: _____

Submit One Copy of your current local utility distribution company bill, all pages, for each account number shown above with your Application

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 _____

If Yes, Submit a copy of the current signed contract with your Application

Cooperative Participation Terms and Conditions

*Participation in the Cooperative **REQUIRES** continuous membership in the chamber during the full term of the Agreement. If your membership is not current, you must bring your account current to participate. Submission of the application for participation in the cooperative does not include fees for membership. 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 or renewal electricity and or natural gas supply services agreement obtained through the Chamber of Commerce, Commercial Energy Purchasing Cooperative and CQI Associates, LLC. Market prices and regulations impact the terms, time, and rates of the supplier offer. The supplier 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 that is lower than the current or projected utility company "Standard Offer Rates" will be recommended.

The Applicant/Customer understands and agrees that as part of the competitive bid process, prospective 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 supplier. The Applicant/Customer assures the Commercial Energy Purchasing Cooperative, CQI Associates, LLC, and the selected supplier that they are not in a current supply services Agreement that would prohibit enrollment into the new Agreement. If customer is in a third party Agreement, all data to include but not be limited to copies of the current agreement, current invoices, and contract end date have been provided with this Application. The Commercial Energy Purchasing Cooperative and CQI Associates, LLC is not liable for any fees or penalties from Applicant's/Customer's current or future third party Electricity and/or Natural Gas Supply Company or the current utility distribution service company.

The Applicant/Customer agrees that they will make a decision to accept or reject the offer on the day contracts are offered. The Applicant/Customer understands that the time frame in which to make a decision could be less than four hours. The term "cooperative" is being used to express that the program is an aggregation purchasing program connecting applicants with a supplier in accordance with the regulations permitting customer choice. The applicable Applicant/Customer Cooperative service charges and CQI Associates, LLC professional service fees will be paid by the selected supplier based on the energy consumed during the term of the contract.

The Commercial Energy Purchasing Cooperative and CQI Associates, LLC requires that "Customers" owners, management, staff, associates, consultants, and contractors will not disclose the contents or terms of this document and the proprietary information developed and

provided by the CQI Associates, LLC, to a third party, except in order to comply with the implementation of this Authorization and any applicable law, order, or regulation.

Signature of the Applicant/Customer: _____

Title: _____ *Date:* _____

Please fax application to 410-747-4752. Mail the originals to:

**Carroll County Chamber of Commerce
9 East Main Street
Suite #105
Westminster, MD 21157**