

**CUSTOMER AUTHORIZATION OF THIRD PARTY TO RECEIVE CUSTOMER INFORMATION OR  
ACT ON A CUSTOMER'S BEHALF**

This Customer Authorization of Third Party to Receive Customer Information or Act on a Customer's Behalf form ("Authorization Form") permits a FirstEnergy customer (as defined by the applicable FirstEnergy Utility tariff) and signatories authorized to act on its behalf (hereinafter "Customer") to delegate certain rights to authorized third parties concerning FirstEnergy account(s) for services relating to Commercial and Industrial Energy Efficiency Programs offered by FirstEnergy Utilities. The Customer may permit an authorized third party to receive information and/or act as an agent and consultant ("Agent") on its behalf as relating to Energy Efficiency Programs offered by FirstEnergy Utilities and must specify what information the Agent is entitled to receive, what actions the Agent is entitled to perform, and whether the authorization is being provided on a one-time basis or on a longer-term basis.

This Authorization Form must be completed in its entirety and signed by the Customer. Upon completion, return the Authorization Form to FirstEnergy by any of the following means:

**Email:** [EnergyEfficiencyPrograms@firstenergycorp.com](mailto:EnergyEfficiencyPrograms@firstenergycorp.com)

**Mail:**  
FirstEnergy – Energy Efficiency  
Attn: M327  
800 Cabin Hill Drive  
Greensburg, PA 15601

Within thirty (30) days of receipt of the completed Authorization Form, FirstEnergy will respond in writing acknowledging receipt and acceptance of the completed Authorization Form or rejecting the Authorization Form and provide the reason(s) therefor.

Please keep a copy of the completed Authorization Form for your records.

I, \_\_\_\_\_, \_\_\_\_\_  
NAME TITLE (IF APPLICABLE)

of \_\_\_\_\_ ("Customer") have the following mailing address  
NAME OF CUSTOMER OF RECORD

\_\_\_\_\_, and do hereby appoint  
MAILING ADDRESS CITY STATE ZIP

of \_\_\_\_\_  
NAME OF THIRD PARTY MAILING ADDRESS

CITY STATE ZIP

to act as agent and consultant ("Agent") for the listed account(s) and to perform the specific actions and functions as set forth herein.

**A. ACCOUNTS INCLUDED IN THIS AUTHORIZATION:**

1. \_\_\_\_\_  
SERVICE ADDRESS CITY SERVICE ACCOUNT NUMBER

2. \_\_\_\_\_  
SERVICE ADDRESS CITY SERVICE ACCOUNT NUMBER

(For more than two accounts, please list additional account(s) on the **Additional Accounts Authorized** form found on page 5 and attach it to this Authorization Form.)

**B. INFORMATION, ACTS AND FUNCTIONS AUTHORIZED:** This authorization provides authority to the Agent. The Customer must thereafter provide specific written instructions/requests (e-mail is acceptable) about the listed 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 twelve (12) month period.

By executing this Authorization Form, Customer acknowledges and authorizes Agent to act on Customer's behalf to perform the following specific acts and functions: **(Customer must initial all applicable boxes)**

☐ Request and receive Customer data including, but not limited to, billing records, billing history and all meter usage data used for bill calculation for all listed account(s) as specified herein.

☐ Complete, sign, and submit application(s) on behalf of Customer for the listed account(s) as specified herein, regarding Commercial and Industrial Energy Efficiency Programs offered by FirstEnergy for which Customer is eligible to participate.

**C. REBATE INCENTIVE PAYMENTS:** Customer further authorizes the following actions regarding rebate incentive payments: **(Customer must initial all applicable boxes)**

☐ Rebate incentive payment(s) made payable to Customer shall be sent to Agent at the listed address on page 1 of this Authorization Form.

☐ Customer retains 100% of rebate incentive payment(s).

☐ Authorization to issue dual incentive payment to Agent or a third party for the account(s) listed herein. If Customer wishes to assign all, or any percentage of, the approved rebate incentive payment to Agent or a third party, Customer **must** complete the **Dual Incentive Release** in Section D below.

**D. DUAL INCENTIVE RELEASE:**

**(Complete this section only if Customer authorized issuance of dual incentive payment to Agent or a third party in Section C above.)**

Customer may assign any percentage of the approved rebate incentive payment to be paid directly to Agent or the third party listed in the authorization box below. Please note the following:

- This form is applicable to all FirstEnergy Commercial and Industrial Energy Efficiency programs.
- Customer must authorize the payment of any incentive to a non-participant (Agent or any third party). Without Customer's consent, a rebate incentive check will **not** be issued to Agent or a third party.
- This authorization of Dual Incentive Release may be cancelled or changed by Customer at any time by providing a written notice to FirstEnergy. Changes and cancellations will result in a confirmation email to both the Customer and Agent, or third party.
- A signed (wet signature) W-9 form, dated within the past twenty-four (24) months, is required for Customer and any Agent, or third party designated to receive incentive payment(s).
- No portion of an approved rebate incentive will be paid to either party until all required documentation is received by the program.
- Assignment/release of any rebate incentive payment to an Agent, or a third party does not exempt Customer from program requirements outlined in the FirstEnergy Program Application(s), Terms and Conditions, and, if applicable, Offer Letter and Final Payment Agreement (specific to certain FirstEnergy Energy Efficiency Programs).

# FirstEnergy Commercial & Industrial Energy Efficiency Programs



By executing this Dual Incentive Release, Customer authorizes the percentage of the rebate incentive payment indicated below to be paid to Agent or the third party listed below:

<b>Payable To:</b>		<b>Representative Contact:</b>	
<b>Mailing Address:</b>	<b>City:</b>	<b>State:</b>	<b>Zip:</b>
<b>Phone:</b>	<b>Email Address:</b>	<b>Tax ID (SSN/FEIN):</b>	
<b>Percentage of approved rebate incentive amount to be paid to Agent or the third party noted above:</b> _____ %			

By signing, I certify that I have read, understand, and agree to the terms and conditions stated in this Section D and I am authorized to sign on behalf of the participant. I hereby release the above percentage of the approved rebate incentive payment to Agent or the third party listed above.

Customer Signature: \_\_\_\_\_

Print Name: \_\_\_\_\_

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

**E. DURATION OF AUTHORIZATION:** The authorizations provided in this Authorization Form are valid for the following time period: **(Customer must initial one box only)**

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

☐ Authorization is given for the period commencing with the date of execution of this Authorization Form until \_\_\_\_\_, 20\_\_\_\_. (This authorization is limited in duration to the calendar year in which the date of execution of this Authorization Form occurred.) If this option is selected, 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.

If no duration of authorization is specified, this authorization will be limited to a one-time authorization only. Termination of the authorizations provided in this Authorization Form requires written notice to FirstEnergy. FirstEnergy will respond within thirty (30) days of receipt of written notice.

**F. COMMERCIAL AND INDUSTRIAL ENERGY EFFICIENCY PROGRAM REQUIREMENTS:** Customer acknowledges and agrees that by participating in any of the Commercial and Industrial Energy Efficiency Programs offered by FirstEnergy, the following is required:

- A signed (wet signature) W-9 form, dated within the past twenty-four (24) months, is required for Customer, and must be submitted with program application(s).
- **For Pennsylvania ONLY:** Agent must submit completed application(s), and all supporting documentation, within sixty (60) days of completed project for which application is being made or such application will not be accepted by FirstEnergy Pennsylvania Utilities (Metropolitan Edison Company, Pennsylvania Electric Company, Pennsylvania Power Company, and West Penn Power Company).

## FirstEnergy Commercial & Industrial Energy Efficiency Programs



- No portion of an approved rebate incentive payment will be paid to Customer or any authorized third party, including Agent, until all required documentation is received by the program.
- By participating in these energy efficiency and peak demand reduction programs, Customer agrees to allow its FirstEnergy Utility to retain ownership of all Capacity Rights which refers to the demand reduction associated with any energy efficiency and peak demand reduction measure for which incentives were provided by FirstEnergy. Your FirstEnergy Utility will aggregate these energy efficiency demand reduction attributes into the PJM capacity market with proceeds being used to offset the program costs.

### **G. ACKNOWLEDGEMENT AND SIGNATURE:**

#### **BY CUSTOMER:<sup>1</sup>**

I (Customer), \_\_\_\_\_, affirm that I am authorized to execute this document on behalf of the customer of record listed on page 1 of this form and that I have authority to financially bind the customer of record. I further certify that Agent has authority to act on my behalf and request the release of information for the account(s) listed on this form and perform the specific acts and functions listed above. I understand FirstEnergy Utilities reserve the right to verify any authorization request submitted before releasing information or taking any action on my behalf. I authorize FirstEnergy Utilities to release the requested information on the listed account(s) or facilities to the above Agent who is acting on my behalf regarding the matters listed above. I hereby release, hold harmless, and indemnify FirstEnergy Utilities from any liability, claims, demands, causes of action, damages, losses, fines, penalties, fees, costs, or expenses resulting from: 1) any release of information to Agent pursuant to this authorization; 2) the unauthorized use of this information or actions taken by Agent; and 3) any actions taken by Agent pursuant to this authorization. I understand that I may cancel this authorization at any time by submitting a written request to FirstEnergy at the mailing address listed above.

As evidenced by my initials indicated on this Authorization Form, I hereby acknowledge that I have read and understand the contents of this Authorization Form, and that I am voluntarily signing this Authorization Form.

\_\_\_\_\_  
AUTHORIZED CUSTOMER SIGNATURE

\_\_\_\_\_  
TELEPHONE NUMBER

\_\_\_\_\_  
AUTHORIZED CUSTOMER TITLE

\_\_\_\_\_  
E-MAIL

Executed this \_\_\_\_\_ day of \_\_\_\_\_ 20\_\_\_\_ at \_\_\_\_\_  
CITY AND STATE WHERE EXECUTED

#### **BY AGENT:**

I (Agent), hereby release, hold harmless, and indemnify FirstEnergy Utilities from any liability, claims, demands, causes of action, damages, losses, fines, penalties, fees, costs 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.

\_\_\_\_\_  
AUTHORIZED AGENT SIGNATURE

\_\_\_\_\_  
TELEPHONE NUMBER

\_\_\_\_\_  
AUTHORIZED AGENT PRINT NAME

\_\_\_\_\_  
E-MAIL

\_\_\_\_\_  
AUTHORIZED AGENT TITLE

<sup>1</sup> 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).



ADDITIONAL ACCOUNTS AUTHORIZED

(Complete this page for any additional accounts to be included in this authorization on page 1 and attach to the completed Authorization Form before submitting to FirstEnergy.)

	Name on Account (Service)	Address	City	State	Zip Code	FirstEnergy Number	Account
1							
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