PLEASE COMPLETE AND RETURN TO SUMMER ENERGY SALES:

Email: sales@summerenergy.com or Fax: (713) 375-2797

Letter of Authorization for the Request of Historical Usage Information (English)

Date:	Expiration Date:	
Select Transmission Distribution request)	Service Provider (TDSP) (Required: Select TDSPs that apply to
Oncor	CenterPoint Energy	Sharyland
□AEP	□TNMP	Nueces
usage data, including kWh, kVA o Energy LLC. This information req	r \widetilde{KW} , and interval data (if apuest shall be limited to no mo	or the above referenced TDSP to release energy oplicable) at the following location(s) to Summer ore than the most recent 12-month period of ther summary level and/or interval data is
Summary Billing Data Only	☐Interval Data Only	⊠Both Summary and Interval Data
Please forward usage and Load inf	ormation in electronic (Exce	l) format to: sales@summerenergy.com
If an attachment is used, please use TDSP. TDSP will reject if ESI ID	1	DSP with the ESI IDs that are specific to a ssociated with their territory.
Service Address	ESI ID Number (found on bill)	
AUTHORIZATION		
I affirm that I have the authority to associated with this request.	make and sign this request of	on behalf of my company for all ESI IDs that are
(Signature)	Company I	Name
	usage information and holds th	that they authorization from the Customer identified the TDSP harmless for providing the historical data to
(Name, printed)	Billing Stree	et Address
Title	City, State,	Zip
Telephone		