

AUTHORIZATION FOR RELEASE OF USAGE INFORMATION

You are hereby authorized and instructed to produce and release, to DTE, as requested, orally or in writing, from time to time, all information relative to our UTILITY HISTORY, including, but not limited to, consumption history for 12 months, load profiles, and 12 months of interval metered data if available for the account listed and on Additional Accounts list, if attached.

This authorization in no way binds me to the purchase of any service of product or product from and is to be used for the sole purpose of determining my offer price of electricity service. This offer shall remain in effect until revoked in writing by the undersigned.

1) Your company information.

Contact Name:		
Company Name:		
Mailing Address:	City:	_ State: Zip:
Contact Phone: ()	Fax: ()	_ Email:
X Business representative's signature (rec	quired)	Date

2) Your Account Information. Must include most recent copy of utility bill per account.

Account Number: (10 digits)

Service Address	City	State	Zip Code	Rate Code	Utility Name*

* **Utility Name** (Dayton Power & Light)

If you have additional accounts, please complete Additional Accounts List.

3) Type of data requested (INTERNAL USE ONLY)

- □ Sixty (60) minute interval data (if available) provided in ASCII text file
- □ Monthly billing information (will be provided if 60 minute interval data is unavailable)



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ADDITIONAL ACCOUNTS LIST - (attach as many as necessary)

Account Number: (10 digits)

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Service Address	City	State	Zip Code	Rate Code	Utility Name*

Account Number: (10 digits)

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