

Municipal Electric and Gas Alliance (MEGA) Participation Authorization

Yes, we are interested in procuring energy supplies and services through the **Municipal Electric and Gas Alliance** (“Alliance”). In signing below, we are indicating our consent and authorization:

1. For our electric and/or gas utilities to provide data (which will be kept confidential) about our energy usage and costs that may be requested by the Alliance, its consultants (Energy Next, Inc.), and/or selected suppliers;
2. For the Alliance to include our name listed as a potential power purchaser for the purposes of supporting competitive bid documents to be issued by the Alliance to providers of energy supplies and services.

NOTE: The execution of this “Intent to Participate” is NOT a commitment by you or MEGA, nor an obligation by you to contract for electricity or natural gas through or in conjunction with the Alliance. No commitment or obligation will be required until a pricing offer and agreement is presented to you and accepted by you. MEGA is a non-profit municipally based corporation serving participants in six New York counties that exists to aggregate customer purchasing power for electricity and natural gas and to advocate for the interests of our participants. MEGA is not an energy services corporation (ESCO). MEGA is not a cooperative. The submission of this form does not require the payment of any fees. Your participation in MEGA does not offer you voting membership on activities of this corporation.

Name or Organization _____

Address _____

City _____ State _____ Zip _____

Contact person (if different from above) _____ Title _____

Phone _____ Fax _____ e-mail _____

The following information may be obtained from your monthly bill. Attach extra sheets if necessary:

Electric Utility _____ **Electric Supplier** _____

Account Number(s) (NYSEG Customers provide POD#)	Service Location(s) (only if different from above)	Service Classification (Municipal, Commercial, or Residential Account)
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____

Note: If you have many separate accounts attach a list to this form.

Gas Utility _____ **Gas Supplier** _____

Account Number(s) (NYSEG Customers provide POD#)	Service Location(s) (only if different from above)	Service Classification (Municipal, Commercial, or Residential Account)
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____

Signature _____ Title _____ Date _____

PLEASE RETURN THIS FORM TO: MEGA, PO BOX 88, ITHACA, NY 14851-0088