

ELECTRIC SUPPLIER AUTHORIZATION

(PLEASE COMPLETE ONE COPY OF THIS FORM FOR EACH ELECTRIC DISTRIBUTION UTILITY)

CUSTOMER NAME: _____
(NAME OF BUSINESS AS SEEN ON UTILITY BILL)

BILLING ADDRESS: _____

CITY/STATE/ZIP: _____

UTILITY NAME: _____

UTILITY ACCOUNT NUMBERS:

(1) _____

(2) _____

(3) _____

(4) _____

(5) _____

(6) _____

(ATTACH LIST OF ADDITIONAL ACCOUNT NUMBERS)

PSE&G CUSTOMERS INCLUDE 20-DIGIT PODID PE#

This is to advise all parties that we authorize Sprague Operating Resources, LLC, pursuant to the New Jersey Coalition of Automotive Retailers (NJ CAR) Referral Agreement to be our exclusive representative for the negotiation of any Electric Power Supply Agreement, and to have exclusive access to our customer information for the sole purpose of determining any offer price of electricity service or the provision of other energy-related services. Please direct all future communications in regard to power supply to Sprague's attention.

We authorize Sprague Operating Resources, LLC or the potential electricity supplier to act on our behalf to secure all Electric Distribution Utility records and information on an ongoing basis unless and until we direct you otherwise in writing, including at a minimum the customer's account number, data about meter readings, rate class and electric usage, twelve-month payment history, the customer's name, address(es) and telephone number or other information consistent with Public Service Commission rulings.

SIGNED: _____

DATE: _____

PRINT NAME: _____

TITLE: _____

PHONE: _____

FAX: _____

EMAIL: _____

**PLEASE SCAN AND EMAIL THIS
AUTHORIZATION TO
GCAPUTI@NJCAR.ORG WITH COPIES
(FRONT & BACK, ALL PAGES) OF YOUR
TWO MOST RECENT ENERGY BILLS FOR ALL
ACCOUNTS.**

**GAIL CAPUTI, NJ CAR
609.760.2043 (CELL)**