## LETTER OF AUTHORIZATION FOR THE REQUEST OF HISTORICAL USAGE INFORMATION FORM

Date:	Expiration Date:	
Select the TDSP the request ap	oplies to:	
Oncor	CenterPoint Energy	Sharyland
□AEP	□TNMP	Nueces
energy usage data, including kWh,	request and authorization for the above kVA or kW, and interval data (if applinformation request shall be limited to	icable) at the following location
	a separate attachment per TDSP with itted ESI IDs that are not located with	
Service Address	ESI ID Number (found on bill)	
_	information in electronic (Microsof	ft Excel) format
to: Email: boxsupport@broker	onlinexchange.com	
AUTHORIZATION  I affirm that I have the authority ESI IDs that are associated with	to make and sign this request on b this request.	ehalf of my company for all
(Name, signature)	(Company)	
(Name, printed)	(Billing Street Address	ss)
(Title)	(City, State, Zip Code	)
(Email)	(Telephone)	