

## Electric Aggregation Program Opt-Out Notification



Please complete this form if you want to opt-out of your community's electric Aggregation program.

Signature:

*By completing this form, you certify that you are the customer of record for the electric account listed above.*

### Electric Utility Bill Information:

Name as it appears on the bill:

Customer ID Number:

Telephone Number:

Service Street Address:

Service City:

