

# 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 (EnergyNext, 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.

**We understand that the execution of this Participation Authorization is NOT a commitment by this organization, nor an obligation 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 and accepted by us.**

Organization \_\_\_\_\_

Address \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Contact person \_\_\_\_\_ Title \_\_\_\_\_

Alt. Contact person \_\_\_\_\_ Title \_\_\_\_\_

Phone \_\_\_\_\_ Fax \_\_\_\_\_ e-mail \_\_\_\_\_

*Please send information on renewable energy options.* \_\_\_\_\_

*The following information may be obtained from your monthly bill. Attach extra sheets if necessary. Or enroll at [www.megaenergy.org](http://www.megaenergy.org).*

Electric Utility \_\_\_\_\_ Electric Supplier\* \_\_\_\_\_  
(\*Only if it is a company other than your local utility)

Account Number(s) <small>NYSEG/RGE customers provide POD Number(s)</small>	Service Location(s) <small>(only if different from above)</small>	Service or Rate Class <small>(from bill, e.g. “general service”)</small>
_____	_____	_____
_____	_____	_____

Gas Utility \_\_\_\_\_ Gas Supplier\* \_\_\_\_\_  
(\*Only if it is a company other than your local utility)

Account Number(s) <small>NYSEG/RGE customers provide POD Number(s)</small>	Service Location(s) <small>(only if different from above)</small>	Service or Rate Class <small>(from bill, e.g. “general service”)</small>
_____	_____	_____
_____	_____	_____

Signature \_\_\_\_\_ Title \_\_\_\_\_ Date \_\_\_\_\_

**Please return this form to MEGA, Fax to 607-273-8964 or enroll at [www.megaenergy.org](http://www.megaenergy.org)**  
 Municipal Electric and Gas Alliance, PO Box 88 Ithaca, NY 14851-0088  
**If you have questions, please call EnergyNext, Inc. at 518-580-9244.**