## **EnergyAdvantage**

## **Program Agreement**

The EnergyAdvantage Program allows members to monitor their electric usage, manage their account and purchase electricity on a "pay-as-you-go" basis. Enrollment in the EnergyAdvantage Program is voluntary and is available for all residential class locations and small general service locations supporting the residence. Locations must be supported by EnergyUnited's Advanced Metering Infrastructure (AMI) Technology.

PLEASE PRINT		
NAME	ACCOUNT	
PHYSICAL ADDRESS		
CITY	_STATE ZIP CODE	
PRIMARY CONTACT NUMBER		
It is important that EnergyUnited has the correct phone number on-file for your account. Phone numbers are used to quickly access account information, report outages via our automated system, notify our members of planned outages, or provide important information concerning your account. By providing your phone number, you agree that EnergyUnited may contact you at the number provided either by telephone or via our automated outbound messaging system.		
Please note: if you have entered a cell phone number or another number that you later convert to a cell phone number, you agree that we may contact you at this number and normal cell phone charges may apply.		
Participants will receive a copy of the EnergyAdvantage Program Information, Terms and Conditions which must be reviewed prior to enrollment and acceptance of this agreement.		
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EnergyAdvantage accounts are automatically enrolled in	e-billing and their monthly statement will be	
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EnergyAdvantage accounts are automatically enrolled in	e-billing and their monthly statement will be	
EnergyAdvantage accounts are automatically enrolled in delivered electronically to	e-billing and their monthly statement will be  @  /e your monthly billing statement of account by	
EnergyAdvantage accounts are automatically enrolled in delivered electronically to	e-billing and their monthly statement will be  @  we your monthly billing statement of account by by billing statement of account via mail  bank draft payment option. Drafts may occur	
EnergyAdvantage accounts are automatically enrolled in delivered electronically to	e-billing and their monthly statement will be  @  we your monthly billing statement of account by  y billing statement of account via mail  bank draft payment option. Drafts may occur in a credit account balance.  voided check is required and must be attached	

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I understand I am solely responsible for managing my account, maintaining a credit balance, and ensuring the alert notification methods are accurate. I understand if the alert information is not correct, important notifications may not be received.

It is recommended that members select and maintain more than one means of notification. Options may include phone, email or text. Outbound call or text message will include notification that may include personal account information (i.e. disconnection date, account number, name, etc.) Please choose the methods of communication below and provide necessary information.

I choose the following contact methods:	
HOMEPHONE	
CELL PHONE	
By providing your cell phone number, you agree that we may contact you for business purposes. You also agree to receive calls by phone or by our automated outbound messaging system as well as text messages and normal cell phone charges may apply. You may discontinue receiving outbound messages at any time by contacting Customer Care at 800.522.3793.	
TEXT  (Enter provider's name (AT&T, Verizon, Sprint, etc.) This information is needed to set up Text Message option. Do not leave blank).  By providing your text messaging address, you agree that we may contact you for business purposes. You also agree to receive text messages via our automated outbound messaging system and normal text messaging charges may apply. You may opt out of receiving text message at any time by contacting Customer Care at 800.522.3793.	
I have received, read, and understand the EnergyAdvantage Program Information, Terms and Conditions documentation and EnergyAdvantage Program Agreement form. My signature below designates acceptance and voluntary enrollment in the EnergyAdvantage program.	
MEMBER NAME (please print)	*LAST 4 DIGITS OF SOCIAL SECURITY NO.
MEMBER SIGNATURE	DATE (month-day-year)
ENERGYUNITED EMPLOYEE SIGNATURE	DATE (month-day-year)
	* Required for security and privacy purposes

