



# Your Chamber's Electric Coalition

is the quick, easy and safe way to



## SAVE MONEY ON YOUR ELECTRICITY BILLS!

# eas·y·forms (ē'zē·fôrmz) n.

*(Origin: Your Chamber's Electric Coalition- Fox, Smolen & Associates)*

- 1) Forms which allow competitive electric bids to be acquired with ease; posing no difficulty: *EasyForms only take 5 minutes to complete.*
- 2) Free from fees, risk or obligation: *After sending in EasyForms, there is no obligation until you receive and accept a quote.*
- 3) Requiring or exhibiting little effort or endeavor; simple:

Just Follow These 3 Steps...

1. **Fill in and sign the bottom portion of the Letter of Authorization. We'll fill in the rest of the form.**
2. **Complete the Customer Information Form.**
3. **Locate 3 recent electricity bills for each account.**

**FAX both forms AND your bills to:**

**(512) 532-0332**

**Attn: Jacob Childress**

*If you have any questions, please call (888) 822-9090 x104*

Fox, Smolen & Associates, Inc. is an aggregator registered with the Public Utility Commission of Texas (Registration No. 80056).



# FOX SMOLEN & ASSOCIATES

TELECOMMUNICATIONS AND ENERGY SOLUTIONS

707 West Avenue ♦ Suite 207 ♦ Austin, TX ♦ 78701

Phone 888.822.9090 ♦ Fax 512.532.0332

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

Date: \_\_\_\_\_

Expiration Date: \_\_\_\_\_

### LIST TDU (Check TDUs that apply to request)

Oncor

CenterPoint

Sharyland

AEP

TNMP

Entergy Texas

Please accept this letter as a formal request and authorization for the above referenced Distribution Company (TDU) to release energy usage data, including kWh, kVA or KW, and interval data (if applicable) at the following location(s) to **Fox, Smolen & Associates**. This information request shall be limited to no more than the most recent 12-month period of service.

If an attachment is used, please use a separate attachment per TDSP with the ESI IDs that are specific to a TDSP. TDSP will reject if ESI IDs are submitted that are not associated with their territory.

Service Address

ESI ID Number (found on bill)

_____	_____
_____	_____
_____	_____
_____	_____
_____	_____

Please forward usage and load information in electronic (Microsoft Excel) format to:

E-mail: [Aggregation@foxsmolen.com](mailto:Aggregation@foxsmolen.com)

### AUTHORIZATION

I affirm that I have the authority to make and sign this request on behalf of my company for all ESI IDs that are associated with this request.

\_\_\_\_\_  
(Signature)

\_\_\_\_\_  
(Company)

\_\_\_\_\_  
(Name, printed)

\_\_\_\_\_  
(Billing Street Address)

\_\_\_\_\_  
(Title)

\_\_\_\_\_  
(City, State, Zip Code)

\_\_\_\_\_  
(Email Address)

\_\_\_\_\_  
(Telephone Number)

# Fox, Smolen & Associates, Inc.

## ELECTRIC AGGREGATION - CUSTOMER INFORMATION FORM

Billing Name of Your Company or Organization \_\_\_\_\_ (Please Print)

Name of Person Who Will Make the Decision and Sign the Contract \_\_\_\_\_ (Please Print)

Telephone: \_\_\_\_\_ Cell: \_\_\_\_\_

Email Address: \_\_\_\_\_ Fax: \_\_\_\_\_

Do you prefer to receive printed information by email or fax? \_\_\_\_\_ Email \_\_\_\_\_ Fax

Who is your current electricity provider? \_\_\_\_\_

Are you currently under a contract? \_\_\_\_\_ Yes \_\_\_\_\_ No

*(If you are not certain, please contact your current provider. The telephone number is on your bill)*

If "yes", when does your current contract expire? \_\_\_\_\_

*(If you are not certain, please contact your current provider for the EXACT date. The telephone number is on your bill)*

Tax Id # \_\_\_\_\_ Is your organization tax exempt? \_\_\_\_\_ Yes \_\_\_\_\_ No

You are a current member in good standing of the \_\_\_\_\_ Chamber of Commerce.

Fox, Smolen & Associates (PUCT Registration No. 80056) will abide by all Public Utility Commission of Texas rules. FSA will be paid by the Retail Electric Provider you choose. The contract is between the member and the Retail Electric Provider they choose as a result of this process and neither the Chamber nor FSA assumes any liability as a result of the contract.

### Exclusivity Agreement

**During the bidding process, I will not solicit or accept bids and contracts from any source other than the Chamber of Commerce Electricity Program.**

**It is my understanding that this program is exclusive to Chamber members. Our exclusive broker, Fox Smolen & Associates, will provide a complete and independent comparison of competitive offers and contract terms from multiple providers.**

By: \_\_\_\_\_  
(Signature) (Printed Name)

Title: \_\_\_\_\_ Date: \_\_\_\_\_

Company or Organization: \_\_\_\_\_