# THANK YOU FOR YOUR INTEREST IN XOOM ENERGY

To proceed in ACN/XOOM Energy's Big Business and Medium Business Programs, please complete the following forms as instructed below. **Following the checklist below will ensure prompt review and follow up.**

## COMPLETE CUSTOMER INFORMATION FORM

- [ ] All contact information is provided
- [ ] IBO information is provided and complete
- [ ] Under Contract?
  - i. Please have the customer confirm if they are under contract and provide the contract terms and end date

## COMPLETE THE LETTER OF AUTHORIZATION

**Indiana, Kentucky, Michigan and Virginia markets do not apply**

- [ ] You must complete a separate LOA for each legal entity(s) you enroll
- [ ] Complete the Personal Information Section
- [ ] List the accounts for which a quote is requested
- [ ] Print Name
- [ ] Sign and Date

## PROVIDE INVOICE COPIES

- [ ] Please provide the most recent invoice for each account you will be requesting a quote for
- [ ] **For Indiana, Kentucky, Michigan and Virginia only**– Please provide either 12-months of usage or a legible usage graph for each account

**PLEASE BE SURE TO SEND COMPLETE PACKET WITH ALL REQUIRED FORMS TO:**

**EMAIL: bbpinfo@xoomenergy.com**

ACN | XOOM energy

BIGBUSINESS PROGRAM

ALBERTA

# CUSTOMER INFORMATION FORM

**THRESHOLD FOR LARGE/MEDIUM COMMERCIAL ACCOUNTS IS MORE THAN $17,000 IN ANNUAL COMMODITY SPEND.**

**EMAIL:** bbpenergylead@acninc.com

**FAX:** 866.452.0553

**ATTN:** ACN/XOOM Energy Commercial Division

**DATE:** _____ **# OF PAGES:** _____

**IBO NAME:** _____

**IBO #:** _____

**EMAIL:** _____

**PHONE:** _____

**COMPANY NAME:** _____

**CONTACT:** _____ **PHONE:** _____

**EMAIL:** _____

**CURRENTLY BUYING ENERGY FROM:**

☐ Utility ☐ Supplier/Retailer

IF RETAILER

**WHO** _____

**ARE YOU UNDER CONTRACT?**

☐ Yes ☐ No

**ADDITIONAL NOTES:**

_____

_____

**IF YES, WHAT IS THE EXPIRATION DATE?**

_____

## PLEASE MAKE SURE YOU INCLUDE ALL OF THE ITEMS BELOW WHEN SUBMITTING YOUR INFORMATION:

* Big Business Program Customer Information Form Completed
* Letter of Authorization (LOA) Form Completed AND Signed (one form per utility)
* Copy of Your Most Recent Invoice (1 for **each account**)

## CHECK THE UTILITY:

☐ Apex Utilities
☐ ATCO Electric
☐ ATCO Gas
☐ ENMAX
☐ EPCOR
☐ FortisAlberta
☐ Lethbridge Power

## PLEASE NOTE:

ACN/XOOM Energy does not forward or keep incomplete documents; if your Big Business Program Packet is incomplete you will be required to resend the entire packet. Annual spend shall mean per commodity (not combined gas and electric). Any accounts over $500,000 annual spend will be flagged for internal review prior to any customer contact. The Letter of Authorization (LOA) is mandated by the state and required by the utility to release information to XOOM Energy should you choose that option to provide your historical usage information. XOOM Energy cannot modify the LOA. XOOM Energy is not able to provide service to all types of businesses. Completing the Letter of Authorization (LOA) in no way affects your current provider relationship or obligates you to transfer your account or purchase energy from XOOM Energy. The reference to potential cost in the INFORMATION, ACTS AND FUNCTIONS AUTHORIZED section of the Letter of Authorization (LOA) is strictly limited to the possibility that your utility may charge a fee for providing copies of your historic usage information. This is not typical, does not benefit XOOM Energy in any way, and is included to protect the utility in the event they opt to charge fees.

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# AUTHORIZATION FOR RELEASE OF USAGE INFORMATION

**TO: SUPPLIER SUPPORT** **CONSENT ID:** _____

FOR XOOM ENERGY USE ONLY

You are hereby authorized and instructed to produce and release, to XOOM Energy LLC, as requested, orally or in writing, from time to time, all information relative to your UTILITY HISTORY, including, but not limited to, consumption history, data for 12 months, load profiles, payment history and 12 months of interval-metered data if available for the accounts listed below and on the Additional Accounts Listing, if attached.

This authorization in no way binds the Customer to purchase any service or product from XOOM Energy LLC and is to be used for the sole purpose of determining in an offer price for electricity/natural gas service. This authorization shall remain in effect

## YOUR COMPANY INFORMATION

**COMPANY NAME:** _____

**CONTACT:** _____ **EMAIL:** _____

**MAILING ADDRESS:** _____

**CONTACT PHONE:** _____ **FAX:** _____

The undersigned hereby affirms that he/she is authorized to execute this letter of authorization for release of information on behalf of the Customer identified herein.

_____ _____
Authorized Customer Signature Date

_____ _____
Print Name Title

## TYPE OF DATE REQUESTED (COMPLETED BY XOOM ENERGY LLC)

☐ Sixty (60) minute interval data (if available) provided by ASCII text file, or applicable format

☐ Monthly summary usage date

**REQUESTOR/BILLING COMPANY:** XOOM Energy Canada, ULC

**REQUESTOR/BILLING NAME:** _____

**PHONE NUMBER:** _____ **EMAIL:** _____

**BILLING ADDRESS:** _____

**REQUESTOR/BILLING SIGNATURE:** _____

**DATE SIGNED BY REQUESTOR/BILLING CO.:** _____

## Account Information For: Apex Utilities

**Number of Accounts Submitted:** _____

| SERVICE ADDRESS | CITY | ZIP | SITE ID # (13 DIGITS) |
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## Account Information For: ATCO Electric

**Number of Accounts Submitted:** _____

| SERVICE ADDRESS | CITY | ZIP | SITE ID # (13 DIGITS) |
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## Account Information For: ATCO Gas

**Number of Accounts Submitted:** _____

| SERVICE ADDRESS | CITY | ZIP | SITE ID # (13 DIGITS) |
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## Account Information For: ENMAX

**Number of Accounts Submitted:** _____

| SERVICE ADDRESS | CITY | ZIP | SITE ID # (13 DIGITS) |
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## Account Information For: EPCOR

**Number of Accounts Submitted:** _____

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## Account Information For: FortisAlberta

**Number of Accounts Submitted:** _____

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## Account Information For: Lethbridge Power

**Number of Accounts Submitted:** _____

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