

LETTER OF AUTHORIZATION FOR THE REQUEST OF HISTORICAL USAGE INFORMATION

Date: _____ 2014

Expiration Date: _____ 2015

LIST TDU (List TDUs that apply to request)

ONCOR

Phone: (888) 313-6934

Fax (800) 666-3406

E Mail: Contactcenter@oncorgroup.com

Center Point

Phone: (713) 207-3538

Fax (713) 207-9054

E mail: usage.req@centerpointenergy.com

AEP

Phone: (361) 881-5729

Fax (361) 880-6027

E mail: aep_tx_usage_requests@aep.com

TNMP

Phone: (972) 317-5541

Fax (972) 318-0138

E mail: dfielding@tnmp.com

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 SKYPOWER CORP. 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 ESIDs that are specific to a TDSP. TDSP will reject if ESIDs are submitted that are not associated with their territory.

Service Address

ESI Number (found on bill)

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

E-mail:

info@skypowerenergycorp.com

AUTHORIZATION

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

(Signature)

(Company)

(Name, printed)

(Billing Street Address)

(Title)

(City, State, Zip Code)

(Email Address)

(Telephone Number)

This LOA is for informational purposes only and cannot be used to switch utility providers.

SKYPOWER CORPORATION
624 SIX FLAGS DR, SUITE 201
ARLINGTON, TX. 76011
PHONE – 817-385-0305
FAX – 817-385-0375