

MUNICIPAL AUTHORITY AGGREGATION DATA REQUEST FORM

In requesting the information provided below, the undersigned authorized representative for the municipality/ township/county acknowledges that all information provided by ComEd pursuant to this Request Form is and shall remain subject to the confidentiality requirements of 20 ILCS 3855/1-92(c)(2) (incorporating 220 ILCS 5/16-122, and 815 ILCS 505/2HH) and such information will be used only to effectuate the provisions of Section 1-92 of the IPA Act and no other purpose.

Information Provided:

Aggregated Customer Usage Data – A summary of customer usage data (including non residential peak load contributions (PLCs)) and the number of customers itemized by rate classification or delivery service classification.

Customer Name & Mailing Address / Account Numbers – A list of customer names and mailing addresses (or temporary mailing address) for the residential and small commercial customers (NOTE: ComEd cannot verify United States Postal Service Compliance of mailing addresses). In addition, customer account numbers will be included for all customers listed in this report.

Parameters:

Customer Information can be provided based on the name of municipality, county or township. Please select the applicable parameter by entering the name of municipality, county or township in the appropriate box. (For example, if requesting customer information for municipality Anytown, USA, then type “Anytown” in the box next to Municipality)

SELECT ONE

MUNICIPALITY	TOWNSHIP	COUNTY

Date Information is Required:

Note: Each set of data requires a minimum of 10 business days to provide the requested data from date ComEd receives a valid request.

DATE	DATA REQUEST TYPE
	Usage Data
	Name & Mailing Addresses / Account Numbers

By checking this box, I consent to the release of Data directly to the consultant

EMAIL ADDRESS OF CONSULTANT

AUTHORIZED SIGNATURE

TITLE OF AUTHORIZED SIGNATURE

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CHARGES

- **Aggregated usage/PLC, name and address/account number list \$127**
- **Name and address /account numbers list \$64**

Please provide a dated and signed copy of the authorized referendum.

Please submit form via e-mail: DataRequest@ComEd.com, or mail to ComEd, ESSD/Data Request Team, 1919 Swift Drive, Oak Brook, IL 60523 or via fax (630) 684-2830.

DISCLAIMER:

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