

AUTHORIZATION TO SWITCH TO BUNDLED ELECTRIC SERVICE

Residential and Non-Residential Customers
(Watt-hour and Small Commercial 0–100 kW)

CUSTOMER INFORMATION			
DATE	CUSTOMER NAME		
SERVICE ADDRESS	CITY		
MAILING ADDRESS	CITY	STATE	ZIP CODE
DAYTIME PHONE #	EVENING PHONE #		
FAX #	ACCOUNT #		

I authorize ComEd to switch this account from Rate RDS – Retail Delivery Service (“Rate RDS”) to the applicable Basic Electric Service Rate pursuant to ComEd’s tariffs approved by the Illinois Commerce Commission with such switch to be effective on the next scheduled meter reading date, provided that such effective date is at least eighteen (18) calendar days after the Company receives and processes this request and further provided that the retail customer continues to comply with all the prerequisites of service. If you would like to switch to a new electric supplier other than ComEd, please visit [ComEd.com/Customer Choice](http://ComEd.com/CustomerChoice) for a list of eligible Retail Electric suppliers that are eligible to serve you in our service area. (Note: you cannot return to your previous supplier for the next six billing periods.)

AUTHORIZED SIGNATURE	
SIGNATURE	PRINT NAME
TITLE & COMPANY	E-MAIL ADDRESS (For confirmation purposes)

Please email to: ESSDContracts@ComEd.com

Email is the preferred method

Or mail or fax this form to:

ComEd, Electric Supplier Services Enrollment Group
1919 Swift Drive
OakBrook, IL 60523
Fax # (630) 684-2830