

Multi-Location Enrollment Form- Pennsylvania

Thank you for choosing XOOM Energy! This form is to enroll multiple residential or business accounts with XOOM Energy. Make sure you provide all the information requested exactly as it appears on your utility bill. Please enter all the accounts you wish to enroll with XOOM Energy on the corresponding utility account information pages, as well as supplying a copy of one bill for each account listed below. Once completed, please date and sign the form, and include one current invoice copy for each account listed, and **email to bbpinfo@xoomenergy.com**. **All accounts must be billed under one legal entity.** If you prefer to submit account details as an excel spreadsheet, please ensure all data requested below is present for each account. All of this information must be included in order to process enrollments.

IBO Name		IBO Business ID #	
IBO Email		IBO Phone #	

Company Name	
Billing Address	
Phone/Fax #	
Tax ID #	
Contact Name	
Email	

Select Your Utility

- | | | | |
|---|--|--|--|
| <input type="checkbox"/> Columbia Gas of PA | <input type="checkbox"/> FirstEnergy– Met-Ed | <input type="checkbox"/> FirstEnergy– West Penn Power | <input type="checkbox"/> PECO (Natural Gas) |
| <input type="checkbox"/> Duquesne Light | <input type="checkbox"/> FirstEnergy– Penelec | <input type="checkbox"/> National Fuel Gas Company– PA | <input type="checkbox"/> Peoples Natural Gas of PA |
| <input type="checkbox"/> Equitable Gas | <input type="checkbox"/> FirstEnergy– Penn Power | <input type="checkbox"/> PECO (Electricity) | <input type="checkbox"/> Philadelphia Gas Works |
| <input type="checkbox"/> PPL Electric Utilities | <input type="checkbox"/> UGI Gas | | |

By signing below, I acknowledge I am authorized to sign and make binding decisions on behalf of these accounts and accept full responsibility for any liabilities incurred under any one or all of the account(s). I also understand that my acceptance into the XOOM Energy program is contingent on a credit review, and by signing below, I am authorizing XOOM Energy to review my credit. Rates are subject to change and will be determined based on the posted rate on the ACN/XOOM Energy website for the type of plan and term selected on the date of Energy Service Agreement Execution.

THIS IS NOT AN ENERGY SERVICE AGREEMENT. MY ACCOUNTS/METERS WILL NOT SWITCH TO XOOM ENERGY UNTIL I EXECUTE AND RETURN AN ENERGY SERVICE AGREEMENT

Signature _____ Print Name _____

Title _____ Date _____



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Account Information- Columbia Gas of PA

Table with 4 columns: Account Name As Appears on Bill, Service Address, Billing Address If Different, Customer # 15 Digits. The table contains 14 empty rows for data entry.



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Account Information- FirstEnergy- Penn Power

Table with 4 columns: Account Name As Appears on Bill, Service Address, Billing Address If Different, Customer # 20 Digits. The table contains 15 empty rows for data entry.

