

Energy Usage Account Data Release Authorization (Electric)

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The Decarbonization Pathways pilot seeks to reduce fossil fuel usage and fully electrify residential homes. In order to assess energy savings achieved through the pilot, energy usage information is needed. Allowing access to this information is a condition of receiving the benefits of the pilot. By providing the requested information and signing this form, you are granting permission to your energy provider(s) to share your usage information with MassCEC. The data will be received by Abode Energy Management on MassCEC's behalf. MassCEC will only receive anonymous, averaged data. The usage information will be for the period beginning 48 months prior and ending 48 months after the Project Start Date on this release form. Information will be used only for purposes of the Decarbonization Pathways pilot. Any analysis, reporting, or other use of information will not be associated with any individual or property address.

I, [name of account holder]		_(the "Custome	r"), request	and
authorize [name of energy provider]		_ (the "Company	") to releas	e my
historical and future [insert fuel type]		_usage, accour	nt number	and
related data maintained by the Company, to the M	Massachusetts (Clean Energy C	enter or A	bode
Energy Management. The data should cover the pe	eriod from 48 m	onths preceding	the date of	of this
request through the 48 months following the Project	t Start Date. Cu	stomer releases	and indem	nifies
the Company and its employees from any claims, los	s, or damage re	lated to or arising	g from such	data
release.				
Account Holder Signature:	Pro	ject Start Date:		
Billing Address: Street:	, 			
City:	State:	Zip:		
Service Address (if different that above Billing Address	ss):			
Street:				
City:	_ State: MA	Zip:		
Participant Telephone Number:				
Account Number:				
If there is more than one Meter at this Service Address	ss, provide the a	dditional Meter r	number(s):	



Energy Usage Account Data Release Authorization (Gas)

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I, [name of account holder]		. (the "Customer"), request a	ınc
authorize [name of energy provider]		(the "Company") to release	my
historical and future [insert fuel type]		usage, account number a	ınc
related data maintained by the Company, to the Mas	ssachusetts C	Clean Energy Center or Abo	ode
Energy Management. The data should cover the period	od from 48 ma	onths preceding the date of t	his
request through the 48 months following the Project S	tart Date. Cus	stomer releases and indemnif	ies
the Company and its employees from any claims, loss,	or damage rela	ated to or arising from such d	ata
release.			
Account Holder Signature:	Pro	ject Start Date:	
Account Holder Name: (Print name as it appears on the Billing Address: Street:			
City:			
Service Address (if different that above Billing Address)			
Street:			
City:		Zip:	
Participant Telephone Number:			
Account Number:			
If there is more than one Meter at this Service Address,	provide the ac	dditional Meter number(s):	