



BGS-CIEP AUTHORIZATION FORM

(Must be returned to PSE&G by 1/4/2022)

I hereby authorize PSE&G to do the following (please check all that apply):

_____ Enroll my account(s) listed below in the BGS-CIEP hourly pricing option effective June 1, 2022.

_____ Release my account number and contact information to third party suppliers

_____ OR - If applicable, return the account(s) listed below currently enrolled in the BGS-CIEP hourly pricing option to BGS-RSCP service effective June 1, 2022.

Customer _____

Address _____

Municipality _____

Zip code _____

Account Number(s) _____ Rate/Meter # _____

Account Number(s) _____ Rate/Meter # _____

Account Number(s) _____ Rate/Meter # _____

(Attach separate sheet with same information for additional accounts)

Authorized
Contact Name _____

Authorized
Contact Phone _____

Authorized
Signature _____

Please return the completed form to PSE&G:

Scan and email to: LargeCustomerSupport@pseg.com (Subject Line "BGS Opt-In Request")
Or, Fax to: (973) 379-7286, Attn: Business Customer Solutions Support

PLEASE NOTE: This form is NOT to be used to drop or change a Third Party Supplier relationship