



## BGS-CIEP AUTHORIZATION FORM

(Must be returned to PSE&G by 1/3/2024)

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, 2024.

\_\_\_\_\_ 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, 2024.

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](mailto: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**