



LETTER OF AUTHORIZATION

By executing this Letter of Authorization (“LOA”), the FPL customer of record or authorized representative of the FPL customer of record signing below (“FPL Customer”) hereby authorizes FPL to release to FPL Customer’s Designated Agent or Consultant (“Agent”) FPL Customer records specifically identified on this form, which may include FPL Customer account information and consumption data. By executing this LOA, FPL Customer further authorizes FPL to make the specified modifications to the designated account(s) of FPL Customer identified on this LOA at the request of Agent.

Agent: _____

Phone Number of Agent: _____

Email Address of Agent: _____

Signature of Agent: _____

Information and/or records to be disclosed to Agent (Check as applicable):

- | | |
|--|---|
| <input type="checkbox"/> Billing/Payment Options | <input type="checkbox"/> Billing Detail Deposit |
| <input type="checkbox"/> Billing/Payment History | <input type="checkbox"/> Information |
| <input type="checkbox"/> Rate Analysis | <input type="checkbox"/> Whole Building Data |
| <input type="checkbox"/> Other: _____ | |

Modifications to the account(s) Agent is authorized to request (Check as applicable):

- | | |
|---|---------------------------------------|
| <input type="checkbox"/> Address Change | <input type="checkbox"/> EDI |
| <input type="checkbox"/> Rate Change | <input type="checkbox"/> Other: _____ |

Length of the term of the LOA _____ to _____ .

[Note: This LOA will remain in effect for the duration of the period of time indicated above, not to exceed two (2) years, unless revoked in writing sooner. Any revocation of this LOA must be sent by e-mail to LOA@FPL.com.]

By signing below, I acknowledge that I am the FPL customer of record or authorized representative of the FPL customer of record on the account(s) identified below. I further acknowledge that I am specifically requesting FPL to release to Agent the information and material identified above, and that I am authorizing Agent to request the modifications to my account(s) specifically identified above. I further acknowledge that FPL has no legal or contractual relationship with Agent, and that the information provided by FPL to Agent is being provided at the express request of the FPL Customer signing below, and that authorized modifications to FPL Customer's account(s) are being made at the express request of the FPL Customer signing below.

Signature of FPL customer of record or authorized representative of the FPL customer of record:

_____ Print Name: _____

Title: _____ Date: _____ Phone Number: _____

Email Address: _____

Name on FPL Account(s) _____

Specific FPL Account(s) to which this LOA applies: _____

Customer Mailing Address: _____

State of _____

County of _____

The forgoing instrument was signed before me this ____ day of _____, _____
(Day) (Month) (Year)

By _____, who is personally known to me or who has produced a driver's
(Name of FPL customer of record or authorized representative of the FPL customer of record)
license as identification.

(Notary Seal)

Signature of Notary Public _____

Print, type or stamp commissioned name of Notary Public

Commission Number: _____

FPL Use Only

Validated by: _____

Date: _____