



Electric Sample Form 79-1149
Election to Withdraw from the
Capacity Bidding Program Form

Sheet 1

**Please Refer to Attached
Sample Form**



ELECTION TO WITHDRAW FROM THE CAPACITY BIDDING PROGRAM FORM

Instructions: Customers use this notice to officially withdraw from the Capacity Bidding Program (CBP). Send the completed notice to PG&E's Demand Response Program Department by U.S. mail, email, or fax, with a copy to Aggregator from whose Portfolio the Customer is to be withdrawn.

Fax to:

Pacific Gas and Electric Company
Demand Response Program Department
Attn: CBP Manager
FAX: 415.973.4177

Mail signed original to:

Pacific Gas and Electric Company
Demand Response Program Department
Attn: CBP Manager
300 Lakeside Drive
Oakland, CA 94612

Email:

CBPPProgram@pge.com

I, _____ {Insert Customer Name here}, request to be removed from _____ {Insert Aggregator's Name}'s Portfolio in the Capacity Bidding Program (CBP) for Pacific Gas and Electric Company.

I acknowledge that _____ {Insert Customer Name here} may not join another Portfolio in any of PG&E's Aggregator programs, which includes the CBP and the Aggregator Managed Portfolio (AMP) program for the remainder of the DR Season, i.e., the calendar months of May through October.

I understand that this form at all times shall be subject to such modifications as the California Public Utilities Commission may direct from time to time in the exercise of its jurisdiction.

Effective Date of Customer Withdrawal from CBP

Election of Customer to withdraw from Aggregator's Portfolio shall be effective and binding at the end of the then current calendar month in which PG&E received this form identifying the Service Agreement(s) to which the Customer withdrawal applies; provided PG&E receives this form at least fifteen (15) calendar days prior to the end of the then current month. If PG&E receives this form less than fifteen (15) calendar days prior to the end of the then current month, then Customer's withdrawal from Aggregator's Portfolio will be effective the following month.

Customer Name or Authorized Representative of Customer: _____

Title: _____

Signature: _____

Date: _____

	Customer Site Name	PG&E Service Agreement Number	Electric Meter Number	Service Address and City
1.				
2.				
3.				
4.				
5.				

† Information collected on this form is used in accordance with PG&E's Privacy Policy. The Privacy Policy is available at pge.com/privacy.