

PUBLIC UTILITIES COMMISSION

505 VAN NESS AVENUE

SAN FRANCISCO, CA 94102-3298



April 25, 2007

Advice Letter 2821-G-A/3015-E-A

Rose de la Torre
Pacific Gas & Electric
77 Beale Street, Room 1088
Mail Code B10C
San Francisco, CA 94105

Subject: Supplement – Interim Service Agreement and Request for Service Sample
Form Improvements and New Forms

Dear Ms. de la Torre:

Advice Letter 2821-G-A/3015-E-A is effective May 05, 2007. A copy of the advice letter is returned herewith for your records.

Sincerely,

A handwritten signature in dark ink, appearing to read "Sean H. Gallagher".

Sean H. Gallagher, Director
Energy Division

REGULATORY RELATIONS	
M Brown	Tariffs Section
R Dela Torre	D Poster
B Lam	M Hughes
APR 30 2007	
Return to _____	
cc to _____	

Brian K. Cherry
Vice President
Regulatory Relations

77 Beale Street, Room 1087
San Francisco, CA 94105

Mailing Address
Mail Code B10C
Pacific Gas and Electric Company
P.O. Box 770000
San Francisco, CA 94177

415.973.4977
Internal: 223.4977
Fax: 415.973.7226
Internet: BKC7@pge.com

March 27, 2007

Advice 2821-G/3015-E

(Pacific Gas and Electric Company ID U 39 M)

Public Utilities Commission of the State of California

Subject: Interim Service Agreement and Request for Service Sample Form
Improvements and New Forms

Purpose

Pacific Gas and Electric Company (PG&E) hereby submits for filing modifications to its gas and electric Interim Service Agreement (Form 02-2590), Request for Service (Form 62-3282), Authorization to Receive Customer Information or Act upon a Customer's Behalf (English - Form 79-1095 and Spanish - Form 79-1096), and Request Change of Mailing Address to a Third Party Change of Address (Form 79-1097).

Background

Interim Service Agreement (Form 02-2590)

The Interim Service Agreement has been improved to include the option that allows a customer to choose both gas and electric service or just service for one commodity.

Request for Service (Form 62-3282)

The Request for Service application (to be used in conjunction with the Interim Service Agreement) has been updated to be more customer-friendly. Specifically, an e-mail address is requested and the language regarding the need for a social security number is clarified.

*Authorization to Receive Customer Information or Act upon a Customer's Behalf
(English - Form 79-1095 and Spanish - Form 79-1096)*

The new Authorization to Receive Customer Information or Act upon a Customer's Behalf (English and Spanish) is being filed to provide a customer the ability to authorize a property owner or manager to place service in a tenant's name at a designated location.

Request Change of Mailing Address to a Third Party Change of Address (Form 79-1097)

The new Request Change of Mailing Address to a Third Party Change of Address form has been developed to allow a third party to represent a customer and act on the customer's behalf to change the mailing address for the mailing of all utility bills (gas and/or electric), bill inserts, discontinuance notices and other information normally sent to the mailing address on an account(s). This will allow project management firms to receive utility bills and information.

Protests

Anyone wishing to protest this filing may do so by letter sent via U.S. mail, by facsimile or electronically, any of which must be received no later than **April 16, 2007**, which is 20 days after the date of this filing. Protests should be mailed to:

CPUC Energy Division
Tariff Files, Room 4005
DMS Branch
505 Van Ness Avenue
San Francisco, California 94102

Facsimile: (415) 703-2200
E-mail: ijnj@cpuc.ca.gov and mas@cpuc.ca.gov

Copies of protests also should be mailed to the attention of the Director, Energy Division, Room 4004, at the address shown above.

The protest also should be sent via U.S. mail (and by facsimile and electronically, if possible) to PG&E at the address shown below on the same date it is mailed or delivered to the Commission:

Brian K. Cherry
Vice President, Regulatory Relations
Pacific Gas and Electric Company
77 Beale Street, Mail Code B10C
P.O. Box 770000
San Francisco, California 94177

Facsimile: (415) 973-7226
E-mail: PGETariffs@pge.com

Effective Date

PG&E requests that this advice filing become effective on regular notice, **April 26, 2007**, which is 30 calendar days after the date of filing.

Notice

In accordance with General Order 96-A, Section III, Paragraph G, a copy of this advice letter is being sent electronically and via U.S. mail to parties shown on the attached list. Address changes to the General Order 96-A service list should be directed to Rose de la Torre at (415) 973-4716. Advice letter filings can also be accessed electronically at: **<http://www.pge.com/tariffs>**

A handwritten signature in black ink, appearing to read "Brian K. Cheng" followed by a stylized flourish or initials.

Vice President, Regulatory Relations

Attachments

CALIFORNIA PUBLIC UTILITIES COMMISSION

ADVICE LETTER FILING SUMMARY ENERGY UTILITY

MUST BE COMPLETED BY UTILITY (Attach additional pages as needed)

Company name/CPUC Utility No. **Pacific Gas and Electric Company (ID U39)**

Utility type:

☒ ELC

☒ GAS

☐ PLC

☐ HEAT

☐ WATER

Contact Person: Bernard Lam

Phone #: (415) 973-4878

E-mail: bxlc@pge.com

EXPLANATION OF UTILITY TYPE

ELC = Electric

GAS = Gas

PLC = Pipeline

HEAT = Heat

WATER = Water

(Date Filed/ Received Stamp by CPUC)

Advice Letter (AL) #: **2821-G/3015-E**

Subject of AL: Interim Service Agreement and Request for Service Sample Form Improvements and New Forms

Keywords (choose from CPUC listing): Forms

AL filing type: ☐ Monthly ☐ Quarterly ☐ Annual ☒ One-Time ☐ Other _____

If AL filed in compliance with a Commission order, indicate relevant Decision/Resolution #:

N/A

Does AL replace a withdrawn or rejected AL? If so, identify the prior AL: No

Summarize differences between the AL and the prior withdrawn or rejected AL¹: _____

Resolution Required? ☐ Yes ☒ No

Requested effective date: **April 26, 2007**

No. of tariff sheets: 14

Estimated system annual revenue effect (%): N/A

Estimated system average rate effect (%): N/A

When rates are affected by AL, include attachment in AL showing average rate effects on customer classes (residential, small commercial, large C/I, agricultural, lighting).

Tariff schedules affected: Gas and electric Sample Forms

Service affected and changes proposed¹: See advice letter

Pending advice letters that revise the same tariff sheets: N/A

Protests and all other correspondence regarding this AL are due no later than 20 days after the date of this filing, unless otherwise authorized by the Commission, and shall be sent to:

CPUC, Energy Division

Tariff Files, Room 4005

DMS Branch

505 Van Ness Ave.,

San Francisco, CA 94102

jnj@cpuc.ca.gov and mas@cpuc.ca.gov

Pacific Gas and Electric Company

Attn: Brian K. Cherry

Vice President, Regulatory Relations

77 Beale Street, Mail Code B10C

P.O. Box 770000

San Francisco, CA 94177

E-mail: PGETariffs@pge.com

¹ Discuss in AL if more space is needed.

**ATTACHMENT 1
Advice 2821-G**

Cal P.U.C. Sheet No.	Title of Sheet	Cancelling Cal P.U.C. Sheet No.
24817-G	Sample Form 02-2590--Interim Service Agreement	20147-G
24818-G	Sample Form 62-3282--Request for Service	
24819-G	Sample Form 79-1095--Authorization to Receive Customer Information or Act on Behalf of Customer (English)	New
24820-G	Sample Form 79-1096--Authorization to Receive Customer Information or Act on Behalf of Customer (Spanish)	New
24821-G	Sample Form 79-1097--Request Change of Mailing Address to a Third Party Change of Address	New
24822-G	Table of Contents -- Sample Forms	24612-G
24823-G	Table of Contents -- Title Page	24622-G

**ATTACHMENT 1
Advice 3015-E**

Cal P.U.C. Sheet No.	Title of Sheet	Cancelling Cal P.U.C. Sheet No.
26231-E	Sample Form 02-2590--Interim Service Agreement	17250-E
26232-E	Sample Form 62-3282--Request for Service	
26233-E	Sample Form 79-1095--Authorization to Receive Customer Information or Act on Behalf of Customer	New
26234-E	Sample Form 79-1096--Authorization to Receive Customer Information or Act on Behalf of Customer (Spanish)	New
26235-E	Sample Form 79-1097--Request Change of Mailing Address to a Third Party Change of Address	New
26236-E	Table of Contents -- Sample Forms	25587-E
26237-E	Table of Contents -- Title Page	25712-E



Pacific Gas and Electric Company
San Francisco, California

Cancelling

Revised
Revised

Cal. P.U.C. Sheet No.
Cal. P.U.C. Sheet No.

24817-G
20147-G

PACIFIC GAS AND ELECTRIC COMPANY

INTERIM SERVICE AGREEMENT
FORM NO. 02-2590 (03/07)
(ATTACHED)

(T)

Advice Letter No. 2821-G
Decision No.

106381

Issued by
Brian K. Cherry
Vice President
Regulatory Relations

Date Filed March 27, 2007
Effective _____
Resolution No. _____

INTERIM SERVICE AGREEMENT

This Agreement between _____ (Applicant) and Pacific Gas and Electric Company (PG&E) is to establish and govern the provision of all gas and electric service by PG&E during the time period commencing when a tenant in an individually-metered unit at Applicant's Service Address requests termination of liability for payment of PG&E service, and ending when PG&E establishes service in the name of a new tenant in the same unit. The service provided by PG&E during this time period shall hereinafter be referred to as "Interim Service" at the Applicant's Service Address below:

Check Commodity: GAS _____ ELECTRIC _____ BOTH _____

Please include House number, street, apartment number (if applicable) and city.

Service Address: _____

- 1) Applicant affirms that Applicant is the owner or manager of the property herein referred to as "Applicant's Service Address," where Applicant's Service Address is a property containing separately metered units for lease or rent to third party tenants.
- 2) Whenever a tenant at Applicant's Service Address requests termination of liability for payment for the gas and/or electric service, PG&E will read the meter(s), render a closing bill to the tenant and transfer the account for Interim Service to Applicant. PG&E will send bills for Interim Service, including any applicable minimum charges or service charges, to Applicant at the mailing address shown below.

Applicant's Name _____

Applicant's Mailing Address _____

City, State and Zip Code _____

Please Check Billing preference with multiple Service Addresses:

Individual _____ **Consolidated** _____

If you prefer consolidated billing, please list master account number you want billed _____

- 3) Applicant agrees to be responsible for all bills for Interim Service, including any applicable minimum charges or service charges, for all units within Applicant's Service Addresses.
- 4) Unless otherwise specified by Applicant, electric Interim Service will be automatically assigned and billed to Applicant under the full service option of an applicable electric rate schedule, and/or under an applicable rate schedule under which gas is procured for Applicant by PG&E. Applicant must contact PG&E if Applicant is eligible for and wishes to select a rate schedule option other than the one automatically assigned to an account for Interim Service.
- 5) Nothing in this Agreement prevents Applicant from requesting a rate schedule change for the Interim Service account, at any time during the period of Interim Service. All rate schedule changes will become effective as specified in the applicable rate schedule and in accordance with PG&E's gas and electric Rule 12. If Applicant elects the direct access option for electric Interim Service, Applicant's Electric Service Provider must request direct access service in accordance with electric Rule 22.

- 6) When a closing bill is issued for Interim Service, PG&E may transfer the amount of such bill to one of the Applicant's open PG&E accounts in accordance with the provisions of PG&E's gas and electric Rule 8, Section C.
- 7) Should there be any conflict as to the starting date of a new tenant's responsibility for PG&E service provided at this address, Applicant assumes responsibility for payment of bills until the new tenant establishes service with PG&E. Applicant acknowledges that Applicant has no right to have PG&E retroactively adjust a bill for Interim Service in the event of a delay in establishing PG&E service in a tenant's name.
- 8) Applicant agrees that PG&E shall not be held responsible and will be indemnified by Applicant for any damages resulting from PG&E's failure to perform any part of this agreement. PG&E reserves the right to disconnect services to a tenant for non-payment of electric and/or gas bills in accordance with PG&E's gas and electric rules.
- 9) This agreement may not be assigned, in whole or in part, to another party.
- 10) This agreement may be terminated by either party with 10 days' written notice to the other party. Applicant agrees to provide PG&E with a minimum of 10 days' written notice prior to a change in Applicant's status as owner or manager of Applicant's Facility. If this Agreement is terminated for any reason, Applicant shall remain responsible for the payment of all charges for Interim Service which were incurred in the exercise of this Agreement.
- 11) Correspondence regarding this Agreement should be sent either by facsimile at (209) 476-7694 or mailed to PG&E at the following address:

*Pacific Gas & Electric Company
Correspondence Unit
P.O. Box 997310
Sacramento, CA 95899-7310*

- 12) This Agreement shall at all times be subject to such changes or modifications by the Public Utilities Commission of the State of California as said Commission may, from time to time, direct in the exercise of its jurisdiction.

Property Owner

Property Manager (if appropriate)

Signature: _____

Signature: _____

Print Name: _____

Print Name: _____

Print Title: _____

Print Title: _____

Date: _____

Date: _____

Daytime phone _____

Daytime phone _____

Cell Phone _____

Cell Phone _____

E-Mail Address _____

E-Mail Address _____

Attached (if needed):

Additional Service Addresses



Pacific Gas and Electric Company
San Francisco, California

Cancelling

Revised
Revised

Cal. P.U.C. Sheet No.
Cal. P.U.C. Sheet No.

24818-G

PACIFIC GAS AND ELECTRIC COMPANY

REQUEST FOR SERVICE
FORM NO. 62-3282 (03/07)
(ATTACHED)

(T)

Advice Letter No. 2821-G
Decision No.

106382

Issued by
Brian K. Cherry
Vice President
Regulatory Relations

Date Filed March 27, 2007
Effective _____
Resolution No. _____

REQUEST FOR SERVICE

(For use only with Interim Service Agreement)

The undersigned requests that gas and/or electric service be started at this service address:

House No.	Street	Apt. No.	City
-----------	--------	----------	------

Effective on (must allow three working days):

Month	Day	Year
-------	-----	------

Please note: Request will be worked within three working days of receipt by PG&E. Appointment date should be requested a minimum of three working days in advance and should not be scheduled for a Saturday, Sunday or holiday. Four-hour appointment time frames will be accommodated only if resources are available. If resources are unavailable on the date or time requested, appointments will be scheduled as an all day (8 a.m. to 8 p.m.) appointment.

In the event that the gas and/or electric commodity are physically off, access to the main breaker and/or gas appliances must be provided on the date of the appointment. Is there any reason PG&E would not be able to access our equipment or your gas appliances to complete this request (e.g., locked gate or dog)? ☐ Yes ☐ No

If Yes, please explain: _____

The following information is required to establish the above utility service: (Please Print)

Your Name: _____

First	Middle	Last
-------	--------	------

Mailing Address (if different from service address):

Telephone Numbers (include area code and extension):

Home	Business
------	----------

Email Address: _____

Previous Address:

House No.	Street	Apt. No.	City
-----------	--------	----------	------

How Long? _____ Was PG&E service in your name? ☐ Yes ☐ NoIf yes, has it been turned off? ☐ Yes ☐ No Approximate Date: _____(Any outstanding balance will be included in your initial bill at the new service address.)

Month	Day	Year
-------	-----	------

If no, do you want it turned off? ☐ Yes ☐ No _____

Month	Day	Year
-------	-----	------

Social Security Number: _____

(In order to start service it may be necessary to perform a credit check to determine whether or not security is required. If security is required, it will be included on your bill. If the Social Security Number is not provided, security will be required and also included on your bill.)

If applicable, name of spouse or domestic partner: _____

Please note: Copies of applicable rates and rules are available online at http://www.pge.com/rates_regulations/. You will receive rate information in the mail. Please call our toll-free customer service number (800) 743-5000 if you would like to change your rate or customer information.

Signature of applicant(s): _____ Date: _____

FAX TO: (916) 923-7261

PG&E USE ONLY:

Order issued on: _____ by: _____ Account ID: _____

PACIFIC GAS AND ELECTRIC COMPANY

AUTHORIZATION TO RECEIVE CUSTOMER INFORMATION OR ACT UPON A
CUSTOMER'S BEHALF
FORM NO. 79-1095 (03/07)
(ATTACHED)

$$\begin{array}{c} (N) \\ | \\ (N) \end{array}$$

Advice Letter No. 2821-G
Decision No.

106383

Issued by
Brian K. Cherry
Vice President
Regulatory Relations

Date Filed March 27, 2007
Effective _____
Resolution No. _____



AUTHORIZATION TO RECEIVE CUSTOMER INFORMATION OR ACT UPON A CUSTOMER'S BEHALF

THIS IS A LEGALLY BINDING CONTRACT, PLEASE READ CAREFULLY
(Please Print or Type)

I, _____
NAME TITLE (IF APPLICABLE)

of _____ (Customer) have the following mailing address
NAME OF CUSTOMER OF RECORD

_____, and do hereby appoint
MAILING ADDRESS CITY STATE ZIP

of _____
NAME OF THIRD PARTY MAILING ADDRESS
CITY STATE ZIP

To act as my agent and consultant (Agent) for the listed account(s) and in the categories indicated below:

ACCOUNTS INCLUDED IN THIS AUTHORIZATION:

- | | | |
|----|-------------------------------|---------------------------------|
| 1. | _____
SERVICE ADDRESS CITY | _____
SERVICE ACCOUNT NUMBER |
| 2. | _____
SERVICE ADDRESS CITY | _____
SERVICE ACCOUNT NUMBER |
| 3. | _____
SERVICE ADDRESS CITY | _____
SERVICE ACCOUNT NUMBER |

(For more than three accounts, please list additional accounts on a separate sheet and attach it to this form)

INFORMATION, ACTS AND FUNCTIONS AUTHORIZED – This authorization provides authority to the Agent. The Agent must thereafter provide specific written instructions/requests (e-mail is acceptable) about the particular account(s) before any information is released or action is taken. In certain instances, the requested act or function may result in cost to you, the customer. Requests for information may be limited to the most recent 12 month period.

I (Customer) authorize my Agent to act on my behalf to perform the following specific acts and functions (initial all applicable boxes):

- ☐ 1. Request and receive billing records, billing history and all meter usage data used for bill calculation for all of my account(s), as specified herein, regarding utility services furnished by the Utility¹.
- ☐ 2. Request and receive copies of correspondence in connection with my account(s) concerning (initial all that apply):
- | | |
|--------------------------|--|
| ☐ | a. Verification of rate, date of rate change, and related information; |
| ☐ | b. Contracts and Service Agreements; |
| ☐ | c. Previous or proposed issuance of adjustments/credits; or |
| ☐ | d. Other previously issued or unresolved/disputed billing adjustments. |
- ☐ 3. Request investigation of my utility bill(s).
- ☐ 4. Request special metering, and the right to access interval usage and other metering data on my account(s).
- ☐ 5. Request rate analysis.
- ☐ 6. Request rate changes.
- ☐ 7. Request and receive verification of balances on my account(s) and discontinuance notices.

¹ The Utility will provide standard customer information without charge up to two times in a 12-month period per service account. After two requests in a year, I understand I may be responsible for charges that may be incurred to process this request.

AUTHORIZATION TO RECEIVE CUSTOMER INFORMATION OR ACT ON A CUSTOMER'S BEHALF

I (CUSTOMER) AUTHORIZE THE RELEASE OF MY ACCOUNT INFORMATION AND AUTHORIZE MY AGENT TO ACT ON MY BEHALF ON THE FOLLOWING BASIS² (initial one box only):

² If no time period is specified, authorization will be limited to a one-time authorization

- ☐ One time authorization only (limited to a one-time request for information and/or the acts and functions specified above at the time of receipt of this Authorization).
- ☐ One year authorization - Requests for information and/or for the acts and functions specified above will be accepted and processed each time requested within the twelve month period from the date of execution of this Authorization.
- ☐ Authorization is given for the period commencing with the date of execution until _____ (Limited in duration to three years from the date of execution.) Requests for information and/or for the acts and functions specified above will be accepted and processed each time requested within the authorization period specified herein.

RELEASE OF ACCOUNT INFORMATION:

The Utility will provide the information requested above, to the extent available, via any one of the following. My (Agent) preferred format is (check all that apply):

- ☐ Hard copy via US Mail (if applicable).
- ☐ Facsimile at this telephone number: _____
- ☐ Electronic format via electronic mail (if applicable) to this e-mail address: _____

I (Customer), _____ (print name of authorized signatory), declare under penalty of perjury under the laws of the State of California that I am authorized to execute this document on behalf of the Customer of Record listed at the top of this form and that I have authority to financially bind the Customer of Record. I further certify that my Agent has authority to act on my behalf and request the release of information for the accounts listed on this form and perform the specific acts and functions listed above. I understand the Utility reserves the right to verify any authorization request submitted before releasing information or taking any action on my behalf. I authorize the Utility to release the requested information on my account or facilities to the above Agent who is acting on my behalf regarding the matters listed above. I hereby release, hold harmless, and indemnify the Utility from any liability, claims, demands, causes of action, damages, or expenses resulting from: 1) any release of information to my Agent pursuant to this Authorization; 2) the unauthorized use of this information by my Agent; and 3) from any actions taken by my Agent pursuant to this Authorization, including rate changes. I understand that I may cancel this authorization at any time by submitting a written request. [This form must be signed by someone who has authority to financially bind the customer (for example, CFO of a company or City Manager of a municipality).]

AUTHORIZED CUSTOMER SIGNATURE

Executed this _____ day of _____
MONTH YEAR

TELEPHONE NUMBER

at _____
CITY AND STATE WHERE EXECUTED

I (Agent), hereby release, hold harmless, and indemnify the Utility from any liability, claims, demand, causes of action, damages, or expenses resulting from the use of customer information obtained pursuant to this authorization and from the taking of any action pursuant to this authorization, including rate changes.

AGENT SIGNATURE

TELEPHONE NUMBER

COMPANY

Executed this _____ day of _____
MONTH YEAR



Original

Cal. P.U.C. Sheet No.
Cal. P.U.C. Sheet No.

24820-G

PACIFIC GAS AND ELECTRIC COMPANY

AUTHORIZATION TO RECEIVE CUSTOMER INFORMATION OR ACT UPON A
CUSTOMER'S BEHALF (SPANISH)
FORM NO. 79-1096 (03/07)
(ATTACHED)

$$\begin{array}{c} (N) \\ | \\ | \\ | \\ | \\ (N) \end{array}$$

Advice Letter No.	2821-G
Decision No.	

106384

Issued by
Brian K. Cherry
Vice President
Regulatory Relations

Date Filed March 27, 2007
Effective _____
Resolution No. _____

AUTORIZACIÓN PARA RECIBIR INFORMACIÓN DE UN CLIENTE O ACTURA EN REPRESENTACIÓN DE UN CLIENTE

EL PRESENTE ES UN CONTRATO JURÍDICAMENTE VINCULANTE. LÉALO DETENIDAMENTE
(Por favor, escriba a máquina o con letra de imprenta)

Yo _____
NOMBRE PUESTO (SI ES PERTINENTE)

de _____ (Cliente) tiene la siguiente dirección postal
NOMBRE DEL CLIENTE REGISTRADO

_____, y a través del presente designo a
DIRECCIÓN POSTAL CIUDAD ESTADO CÓDIGO POSTAL

de _____
NOMBRE DEL TERCERO DIRECCIÓN POSTAL

CIUDAD ESTADO CÓDIGO POSTAL

para actuar como mi agente y asesor (Agente) para la(s) cuenta(s) que aparece(n) listada(s) y en las categorías indicadas más adelante:

CUENTAS INCLUIDAS EN ESTA AUTORIZACIÓN:

1. _____
DIRECCIÓN DEL SERVICIO CIUDAD NÚMERO DE CUENTA DEL SERVICIO
2. _____
DIRECCIÓN DEL SERVICIO CIUDAD NÚMERO DE CUENTA DEL SERVICIO
3. _____
DIRECCIÓN DEL SERVICIO CIUDAD NÚMERO DE CUENTA DEL SERVICIO

(Para más de tres cuentas, por favor enumere las cuentas adicionales en una hoja de papel por separado y adjúntela a este formulario)

INFORMACIÓN, FUNCIONES Y ACTOS AUTORIZADOS – Esta autorización le proporciona autoridad al Agente. Subsecuentemente, el Agente debe suministrar instrucciones/solicitudes específicas por escrito (el uso de E-mail es aceptable) acerca de la(s) cuenta(s) particular(es) antes de que alguna información sea divulgada o una acción sea llevada a cabo. Bajo algunas circunstancias, la función o acto solicitado podría incurrir en un costo para usted, el cliente. Las solicitudes de información podrían estar limitadas al periodo de 12 meses más reciente.

Yo (Cliente) autorizo a mi Agente a actuar en representación mía en el desempeño de los siguientes actos y funciones específicos (escriba sus iniciales en todos los casilleros pertinentes):

- ☐ 1. Solicitar y recibir expedientes de facturación, el historial de facturación y todos los datos de medición del consumo que son utilizados para calcular el monto de las facturas de la totalidad de mi(s) cuenta(s), tal como se especifique en el presente, en relación con los servicios públicos suministrados por la Compañía de Servicios Públicos¹.
- ☐ 2. Solicitar y recibir copias de correspondencia relacionada con mi(s) cuenta(s) relativas a (ponga sus iniciales en todas las respuestas pertinentes):
 - ☐ a. Verificación de tarifas, fecha de cambio de tarifas e información relacionada;
 - ☐ b. Contratos y Convenios de Servicio;
 - ☐ c. Emisión previa o propuesta de ajustes/créditos; o
 - ☐ d. Otros ajustes de facturación no resueltos/en disputa que hayan sido emitidos previamente.
- ☐ 3. Solicitar una investigación de mi(s) cuenta(s) de servicios públicos.
- ☐ 4. Solicitar una medición especial, y el derecho a tener acceso a información de consumo en intervalos y otra información de medición relacionada con mi(s) cuenta(s).
- ☐ 5. Solicitar un análisis de tarifas.
- ☐ 6. Solicitar modificaciones en las tarifas.
- ☐ 7. Solicitar y recibir verificación de los saldos de mi(s) cuenta(s) y notificaciones de interrupción del servicio.

¹ La Compañía de Servicios Públicos proporciona información estándar sobre el cliente sin costo alguno hasta dos veces en un periodo de 12 meses por cuenta del servicio. Después de dos solicitudes en un año, comprendo que podría ser responsable de los cargos en lo que se podría incurrir para tramitar esta solicitud.

AUTORIZACIÓN PARA RECIBIR INFORMACIÓN DE UN CLIENTE O ACTUAR EN REPRESENTACIÓN DE UN CLIENTE

YO (CLIENTE) AUTORIZO LA DIVULGACIÓN DE LA INFORMACIÓN SOBRE MI CUENTA Y AUTORIZO A MI AGENTE A ACTUAR EN REPRESENTACIÓN MÍA DE LA SIGUIENTE MANERA² (ponga sus iniciales únicamente en un casillero):

² Si no se especifica un límite de tiempo, la autorización estará limitada a una sola ocasión

- ☐ Autorización para una ocasión únicamente (limitada a una sola solicitud de información y/o los actos y funciones especificados anteriormente al momento de recibir esta Autorización).
- ☐ Autorización durante un año – Las solicitudes de información y/o para los actos y funciones especificados anteriormente serán aceptados y tramitados cada vez que sean solicitados dentro de un periodo de doce meses a partir de la fecha de firma de esta Autorización.
- ☐ Se otorga la Autorización durante el periodo que inicia a partir de la fecha de firma de esta Autorización hasta _____ (Duración limitada a tres años a partir de la fecha de firma de esta Autorización.) Las solicitudes de información y/o para los actos y funciones especificados anteriormente serán aceptados y tramitados cada vez que sean solicitados dentro del periodo de vigencia de la Autorización especificado en el presente.

DIVULGACIÓN DE LA INFORMACIÓN SOBRE LA CUENTA:

La Compañía de Servicios Públicos proporcionará la información solicitada anteriormente, en el grado en el que esté disponible, a través de uno de los siguientes medios. El formato que prefiero (prefiere mi Agente) es (marque todas las respuestas correspondientes)

- ☐ Copia impresa a través del Servicio de Correos de Los EE.UU. (de ser pertinente).
- ☐ Documento por fax a este número telefónico: _____
- ☐ Formato electrónico a través de E-mail (de ser pertinente) a esta dirección de E-mail: _____

Yo (El Cliente), _____ (nombre del signatario autorizado en letra de imprenta), declaro bajo pena de perjurio según lo dispuesto por las leyes del Estado de California que estoy autorizado para firmar este documento en representación del Cliente Registrado que aparece indicado en la parte superior de este formulario, y que poseo la autoridad para obligar financieramente al Cliente Registrado. Asimismo, también certifico que mi Agente posee la autoridad para actuar en representación mía y solicitar la divulgación de información sobre las cuentas indicadas en este formulario y desempeñar los actos y funciones específicos indicados anteriormente. Comprendo que la Compañía de Servicios Públicos se reserva el derecho de verificar toda solicitud de autorización presentada antes de divulgar información o desempeñar algún acto en representación mía. Autorizo a la Compañía de Servicio Público a divulgarle la información solicitada sobre mi cuenta o instalaciones al Agente mencionado anteriormente quien actúa en representación mía en lo relacionado con los asuntos indicados anteriormente. A través del presente, libero de responsabilidad e indemnizo a la Compañía de Servicios Públicos de toda responsabilidad, reclamación, demanda, antecedente de acción judicial, daño o gasto que pudiera resultar de: 1) cualquier divulgación de información a mi Agente de conformidad con esta Autorización; 2) el uso autorizado de esta información por parte de mi Agente; y 3) cualquier acción tomada por mi Agente de conformidad con esta Autorización, incluyendo modificaciones en las tarifas. Comprendo que puedo cancelar esta Autorización en cualquier momento con tan sólo presentar una solicitud por escrito. [Este formulario debe estar firmado por una persona que posea la autoridad de obligar financieramente al cliente (por ejemplo, el Director Financiero de una compañía o el Administrador Municipal de una municipalidad).]

FIRMA DEL CLIENTE AUTORIZADO

Firmado este día _____ de _____ de _____
MES AÑO

NÚMERO TELEFÓNICO

en _____
CIUDAD Y ESTADO DONDE ES FIRMADO

Yo (El Agente), a través del presente libero de responsabilidad e indemnizo a la Compañía de Servicios Públicos de toda responsabilidad, reclamación, demanda, antecedente de acción judicial, daño o gasto que pudiera resultar del uso de la información sobre el cliente obtenida de conformidad con esta autorización y de desempeñar cualquier acción de conformidad con esta autorización, incluyendo la modificación de las tarifas.

FIRMA DEL AGENTE

NÚMERO TELEFÓNICO

COMPañÍA

Firmado este día _____ de _____ de _____
MES AÑO

PACIFIC GAS AND ELECTRIC COMPANY

REQUEST CHANGE OF MAILING ADDRESS TO A THIRD PARTY CHANGE OF ADDRESS

FORM NO. 79-1097 (03/07)

(ATTACHED)

$$\begin{array}{c} (N) \\ | \\ (N) \end{array}$$

REQUEST CHANGE OF MAILING ADDRESS TO A THIRD PARTY CHANGE OF ADDRESS

(Please Type or Print)

1. CUSTOMER INFORMATION:

CUSTOMER/COMPANY NAME

MAILING ADDRESS

CITY STATE ZIP

() _____ () _____
TELEPHONE NUMBER FACSIMILE NUMBER

2. REQUESTED CHANGE TO MAILING ADDRESS (In order for this form to be processed, all of the following information must be provided):

INFORMATION RECIPIENT

C/O

COMPANY NAME (If Applicable)

MAILING ADDRESS

CITY STATE ZIP

() _____ () _____
TELEPHONE NUMBER FACSIMILE NUMBER

CHANGE OF MAILING ADDRESS SHOULD TAKE EFFECT ON _____.
DATE

3. ACCOUNTS INCLUDED IN THIS REQUEST:

ADDRESS CITY SERVICE ACCOUNT NUMBER

ADDRESS CITY SERVICE ACCOUNT NUMBER

ADDRESS CITY SERVICE ACCOUNT NUMBER

(For more than three accounts, please list additional accounts on a separate sheet and attach it to this form.)

REQUEST FOR CHANGE OF MAILING ADDRESS TO A THIRD PARTY ADDRESS (Cont.)

4. By signing below, Customer and Information Recipient acknowledge that account information affected by this request for change of mailing address includes all utility bills (gas and/or electric), bill inserts, discontinuance notices, and other information normally sent to the mailing address on an account(s).

If Pacific Gas and Electric Company (the Company) becomes aware of returned bills, or that the Information Recipient is no longer at the address specified on this form or is repackaging the Company's bill and other information transmitted therewith in a manner unacceptable to the Company, the Company will immediately and without prior notification to Customer or Information Recipient terminate this authorization and revert the mailing address to the Customer's service address, or other mailing address if in the Company's possession and available.

5. I, (Information Recipient), understand that this change of address form authorization does not confer any rights or privileges to act on the customer's behalf. Further, I agree that I will not reorganize or repackage the Company's bill, or other information transmitted therewith, without first providing the reformatted or repackaged bill or information transmitted therewith to the Company. I understand that no reorganizing or repackaging of said information is permitted by the Company without its prior written consent. I release, hold harmless, and indemnify the Company from any claims, damages or expenses resulting from the unauthorized use of this account information, and from the customer's failure to receive the bill, legal and safety notices, discontinuance and other notices, bill inserts and other related rate information. I will not provide this information to other parties without customer authorization.

INFORMATION RECIPIENT

ADDRESS

INFORMATION RECIPIENT SIGNATURE

CITY, STATE, ZIP

6. I, (Customer/Company), authorize the Company to change the mailing address on the accounts listed on this form. I understand that, as a result of this change of address request, I may no longer receive the bill, legal and safety notices, discontinuance and other notices, bill inserts, and other related rate information. I further understand and represent that this change of address form authorization does not confer any rights or privileges upon the third party bill information recipient to act on my behalf. I release, hold harmless, and indemnify the Company from any claims, damages or expenses associated with my failure to receive the bill, legal and safety notices, discontinuance and other notices, bill inserts, and other related rate information and from the unauthorized use of this account information. I further understand that if I should pay the information recipient or any other third party for charges owed to Pacific Gas and Electric Company as a result of the use of this form I will continue to be ultimately responsible for the payment of those charges to Pacific Gas and Electric Company until the payment is forwarded to Pacific Gas and Electric Company by the information recipient or other third party. If the information recipient or other third party fails to pay Pacific Gas and Electric Company in accordance with the Company's Rule 11 (discontinuance procedures) for any reason, I understand that I will be responsible for the payment of those utility charges to Pacific Gas and Electric Company. I further certify that I have authority to authorize the change of address for the accounts listed on this form.

AUTHORIZED CUSTOMER/COMPANY NAME

DEPARTMENT

AUTHORIZED SIGNATURE

TITLE

DATE



TABLE OF CONTENTS

Sample Forms

SCHEDULE	TITLE OF SHEET	CAL P.U.C. SHEET NO.	
79-1088	Supplemental Agreement For Limited Gas Transmission Capacity	24346-G	
	Sample Forms		
	Rule 2 Description of Service		
79-255	Agreement for Installation or Allocation of Special Facilities	11041-G	
	Sample Forms		
	Rule 3 Application for Service		
01-8670	Credit Application	17658-G	
02-2590	Interim Service Agreement	24817-G	(T)
62-3282	Request for Service	24818-G	(T)
62-0683	Application for Service-Residential Service	23108-G	
62-0684	Application for Service-Residential Subdivision/Development	23109-G	
62-0685	Application for Service-Commercial/Industrial Development	23110-G	
62-0686	Application for Service-Agricultural Service	23111-G	
62-0687	Application for Relocation/Rearrangement	21172-G	
79-1095	Authorization to Receive Customer Information or Act on Behalf of Customer (English)	24819-G	(N)
79-1096	Authorization to Receive Customer Information or Act on Behalf of Customer (Spanish)	24820-G	(N)
79-1097	Request Change of Mailing Address to a Third Party Change of Address	24821-G	(N)
	Sample Forms		
	Rule 13 Temporary Service		
79-875	Rule 13 Temporary Service Agreement	22833-G	
	Sample Forms		
	Rules 15 and 16 Gas Main and Service Extensions		
62-0980	Distribution Service and Extension Agreement	20525-G	
62-0982	Distribution Service and Extension Agreement, Option 2-Competitive Bidding	21593-G	
79-716	General Terms and Conditions for Gas and Electric Extension and Service Construction by Applicant	20526-G	
79-1003	Applicants Cost Verification Form-Statement of Costs for Applicant Installation of Pacific Gas and Electric Company's Distribution and Service Facilities	21595-G	
79-1004	Distribution and Service Extension Agreement Exhibit A Cost Summary	21596-G	
79-1018	Residential Rule 16 Electric/Gas Single Service Extensions	22802-G	
	Sample Forms		
	Rule 19 Medical Baseline Quantities		
61-3481	Medical Baseline Allowance Self-Certification	21123-G	
62-3481	Medical Baseline Allowance Application	21122-G	



Pacific Gas and Electric Company
San Francisco, California

Cancelling

Revised
Revised

Cal. P.U.C. Sheet No. 24823-G
24622-G

TABLE OF CONTENTS

Table of Contents

SCHEDULE	TITLE OF SHEET	CAL P.U.C. SHEET NO.
Title Page		24622-G
Rate Schedules		24656, 24602, 24617, 24657-G
Preliminary Statements		24621, 24535-G
Rules		24610-G
Maps, Contracts and Deviations		24536-G
Sample Forms		24822 , 24369, 24613-24614-G (T)

Advice Letter No.
Decision No.

106387

2821-G

Issued by
Brian K. Cherry
Vice President
Regulatory Relations

Date Filed: 3/27/2007
Effective
Resolution No.



Pacific Gas and Electric Company
San Francisco, California

Cancelling

Revised
Revised

Cal. P.U.C. Sheet No.
Cal. P.U.C. Sheet No.

26231-E
17250-E

PACIFIC GAS AND ELECTRIC COMPANY

INTERIM SERVICE AGREEMENT
FORM NO. 02-2590 (03/07)
(ATTACHED)

(T)

Advice Letter No. 3015-E
Decision No.

106388

Issued by
Brian K. Cherry
Vice President
Regulatory Relations

Date Filed March 27, 2007
Effective _____
Resolution No. _____

INTERIM SERVICE AGREEMENT

This Agreement between _____ (Applicant) and Pacific Gas and Electric Company (PG&E) is to establish and govern the provision of all gas and electric service by PG&E during the time period commencing when a tenant in an individually-metered unit at Applicant's Service Address requests termination of liability for payment of PG&E service, and ending when PG&E establishes service in the name of a new tenant in the same unit. The service provided by PG&E during this time period shall hereinafter be referred to as "Interim Service" at the Applicant's Service Address below:

Check Commodity: GAS _____ ELECTRIC _____ BOTH _____

Please include House number, street, apartment number (if applicable) and city.

Service Address: _____

- 1) Applicant affirms that Applicant is the owner or manager of the property herein referred to as "Applicant's Service Address," where Applicant's Service Address is a property containing separately metered units for lease or rent to third party tenants.
- 2) Whenever a tenant at Applicant's Service Address requests termination of liability for payment for the gas and/or electric service, PG&E will read the meter(s), render a closing bill to the tenant and transfer the account for Interim Service to Applicant. PG&E will send bills for Interim Service, including any applicable minimum charges or service charges, to Applicant at the mailing address shown below.

Applicant's Name _____

Applicant's Mailing Address _____

City, State and Zip Code _____

Please Check Billing preference with multiple Service Addresses:

Individual _____ **Consolidated** _____

If you prefer consolidated billing, please list master account number you want billed _____

- 3) Applicant agrees to be responsible for all bills for Interim Service, including any applicable minimum charges or service charges, for all units within Applicant's Service Addresses.
- 4) Unless otherwise specified by Applicant, electric Interim Service will be automatically assigned and billed to Applicant under the full service option of an applicable electric rate schedule, and/or under an applicable rate schedule under which gas is procured for Applicant by PG&E. Applicant must contact PG&E if Applicant is eligible for and wishes to select a rate schedule option other than the one automatically assigned to an account for Interim Service.
- 5) Nothing in this Agreement prevents Applicant from requesting a rate schedule change for the Interim Service account, at any time during the period of Interim Service. All rate schedule changes will become effective as specified in the applicable rate schedule and in accordance with PG&E's gas and electric Rule 12. If Applicant elects the direct access option for electric Interim Service, Applicant's Electric Service Provider must request direct access service in accordance with electric Rule 22.

- 6) When a closing bill is issued for Interim Service, PG&E may transfer the amount of such bill to one of the Applicant's open PG&E accounts in accordance with the provisions of PG&E's gas and electric Rule 8, Section C.
- 7) Should there be any conflict as to the starting date of a new tenant's responsibility for PG&E service provided at this address, Applicant assumes responsibility for payment of bills until the new tenant establishes service with PG&E. Applicant acknowledges that Applicant has no right to have PG&E retroactively adjust a bill for Interim Service in the event of a delay in establishing PG&E service in a tenant's name.
- 8) Applicant agrees that PG&E shall not be held responsible and will be indemnified by Applicant for any damages resulting from PG&E's failure to perform any part of this agreement. PG&E reserves the right to disconnect services to a tenant for non-payment of electric and/or gas bills in accordance with PG&E's gas and electric rules.
- 9) This agreement may not be assigned, in whole or in part, to another party.
- 10) This agreement may be terminated by either party with 10 days' written notice to the other party. Applicant agrees to provide PG&E with a minimum of 10 days' written notice prior to a change in Applicant's status as owner or manager of Applicant's Facility. If this Agreement is terminated for any reason, Applicant shall remain responsible for the payment of all charges for Interim Service which were incurred in the exercise of this Agreement.
- 11) Correspondence regarding this Agreement should be sent either by facsimile at (209) 476-7694 or mailed to PG&E at the following address:

*Pacific Gas & Electric Company
Correspondence Unit
P.O. Box 997310
Sacramento, CA 95899-7310*

- 12) This Agreement shall at all times be subject to such changes or modifications by the Public Utilities Commission of the State of California as said Commission may, from time to time, direct in the exercise of its jurisdiction.

Property Owner

Property Manager (if appropriate)

Signature: _____

Signature: _____

Print Name: _____

Print Name: _____

Print Title: _____

Print Title: _____

Date: _____

Date: _____

Daytime phone _____

Daytime phone _____

Cell Phone _____

Cell Phone _____

E-Mail Address _____

E-Mail Address _____

Attached (if needed):

Additional Service Addresses



Pacific Gas and Electric Company
San Francisco, California

Cancelling

Revised
Revised

Cal. P.U.C. Sheet No.
Cal. P.U.C. Sheet No.

26232-E

PACIFIC GAS AND ELECTRIC COMPANY

REQUEST FOR SERVICE
FORM NO. 62-3282 (03/07)
(ATTACHED)

(T)

Advice Letter No. 3015-E
Decision No.

106389

Issued by
Brian K. Cherry
Vice President
Regulatory Relations

Date Filed March 27, 2007
Effective _____
Resolution No. _____

REQUEST FOR SERVICE

(For use only with Interim Service Agreement)

The undersigned requests that gas and/or electric service be started at this service address:

House No.	Street	Apt. No.	City
-----------	--------	----------	------

Effective on (must allow three working days):

Month	Day	Year
-------	-----	------

Please note: Request will be worked within three working days of receipt by PG&E. Appointment date should be requested a minimum of three working days in advance and should not be scheduled for a Saturday, Sunday or holiday. Four-hour appointment time frames will be accommodated only if resources are available. If resources are unavailable on the date or time requested, appointments will be scheduled as an all day (8 a.m. to 8 p.m.) appointment.

In the event that the gas and/or electric commodity are physically off, access to the main breaker and/or gas appliances must be provided on the date of the appointment. Is there any reason PG&E would not be able to access our equipment or your gas appliances to complete this request (e.g., locked gate or dog)? ☐ Yes ☐ No

If Yes, please explain: _____

The following information is required to establish the above utility service: (Please Print)

Your Name: _____

First	Middle	Last
-------	--------	------

Mailing Address (if different from service address):

Telephone Numbers (include area code and extension):

Home	Business
------	----------

Email Address: _____

Previous Address:

House No.	Street	Apt. No.	City
-----------	--------	----------	------

How Long? _____ Was PG&E service in your name? ☐ Yes ☐ NoIf yes, has it been turned off? ☐ Yes ☐ No Approximate Date: _____(Any outstanding balance will be included in your initial bill at the new service address.)

Month	Day	Year
-------	-----	------

If no, do you want it turned off? ☐ Yes ☐ No _____

Month	Day	Year
-------	-----	------

Social Security Number: _____

(In order to start service it may be necessary to perform a credit check to determine whether or not security is required. If security is required, it will be included on your bill. If the Social Security Number is not provided, security will be required and also included on your bill.)

If applicable, name of spouse or domestic partner: _____

Please note: Copies of applicable rates and rules are available online at http://www.pge.com/rates_regulations/. You will receive rate information in the mail. Please call our toll-free customer service number (800) 743-5000 if you would like to change your rate or customer information.

Signature of applicant(s): _____ Date: _____

FAX TO: (916) 923-7261

PG&E USE ONLY:

Order issued on: _____ by: _____ Account ID: _____



Original

Cal. P.U.C. Sheet No.
Cal. P.U.C. Sheet No.

26233-E

PACIFIC GAS AND ELECTRIC COMPANY

AUTHORIZATION TO RECEIVE CUSTOMER INFORMATION OR ACT UPON A
CUSTOMER'S BEHALF
FORM NO. 79-1095 (03/07)
(ATTACHED)

$$\begin{array}{c} (N) \\ | \\ | \\ | \\ | \\ (N) \end{array}$$

Advice Letter No.	3015-E
Decision No.	

106390

Issued by
Brian K. Cherry
Vice President
Regulatory Relations

Date Filed March 27, 2007
Effective _____
Resolution No. _____



AUTHORIZATION TO RECEIVE CUSTOMER INFORMATION OR ACT UPON A CUSTOMER'S BEHALF

THIS IS A LEGALLY BINDING CONTRACT, PLEASE READ CAREFULLY
(Please Print or Type)

I, _____
NAME TITLE (IF APPLICABLE)

of _____ (Customer) have the following mailing address
NAME OF CUSTOMER OF RECORD

_____, and do hereby appoint
MAILING ADDRESS CITY STATE ZIP

of _____
NAME OF THIRD PARTY MAILING ADDRESS
CITY STATE ZIP

To act as my agent and consultant (Agent) for the listed account(s) and in the categories indicated below:

ACCOUNTS INCLUDED IN THIS AUTHORIZATION:

- | | | |
|----|-------------------------------|---------------------------------|
| 1. | _____
SERVICE ADDRESS CITY | _____
SERVICE ACCOUNT NUMBER |
| 2. | _____
SERVICE ADDRESS CITY | _____
SERVICE ACCOUNT NUMBER |
| 3. | _____
SERVICE ADDRESS CITY | _____
SERVICE ACCOUNT NUMBER |

(For more than three accounts, please list additional accounts on a separate sheet and attach it to this form)

INFORMATION, ACTS AND FUNCTIONS AUTHORIZED – This authorization provides authority to the Agent. The Agent must thereafter provide specific written instructions/requests (e-mail is acceptable) about the particular account(s) before any information is released or action is taken. In certain instances, the requested act or function may result in cost to you, the customer. Requests for information may be limited to the most recent 12 month period.

I (Customer) authorize my Agent to act on my behalf to perform the following specific acts and functions (initial all applicable boxes):

1. Request and receive billing records, billing history and all meter usage data used for bill calculation for all of my account(s), as specified herein, regarding utility services furnished by the Utility¹.
2. Request and receive copies of correspondence in connection with my account(s) concerning (initial all that apply):
- a. Verification of rate, date of rate change, and related information;

b. Contracts and Service Agreements;

c. Previous or proposed issuance of adjustments/credits; or

d. Other previously issued or unresolved/disputed billing adjustments.
3. Request investigation of my utility bill(s).
4. Request special metering, and the right to access interval usage and other metering data on my account(s).
5. Request rate analysis.
6. Request rate changes.
7. Request and receive verification of balances on my account(s) and discontinuance notices.

¹ The Utility will provide standard customer information without charge up to two times in a 12-month period per service account. After two requests in a year, I understand I may be responsible for charges that may be incurred to process this request.

AUTHORIZATION TO RECEIVE CUSTOMER INFORMATION OR ACT ON A CUSTOMER'S BEHALF

I (CUSTOMER) AUTHORIZE THE RELEASE OF MY ACCOUNT INFORMATION AND AUTHORIZE MY AGENT TO ACT ON MY BEHALF ON THE FOLLOWING BASIS² (initial one box only):

² If no time period is specified, authorization will be limited to a one-time authorization

- ☐ One time authorization only (limited to a one-time request for information and/or the acts and functions specified above at the time of receipt of this Authorization).
- ☐ One year authorization - Requests for information and/or for the acts and functions specified above will be accepted and processed each time requested within the twelve month period from the date of execution of this Authorization.
- ☐ Authorization is given for the period commencing with the date of execution until _____ (Limited in duration to three years from the date of execution.) Requests for information and/or for the acts and functions specified above will be accepted and processed each time requested within the authorization period specified herein.

RELEASE OF ACCOUNT INFORMATION:

The Utility will provide the information requested above, to the extent available, via any one of the following. My (Agent) preferred format is (check all that apply):

- ☐ Hard copy via US Mail (if applicable).
- ☐ Facsimile at this telephone number: _____
- ☐ Electronic format via electronic mail (if applicable) to this e-mail address: _____

I (Customer), _____ (print name of authorized signatory), declare under penalty of perjury under the laws of the State of California that I am authorized to execute this document on behalf of the Customer of Record listed at the top of this form and that I have authority to financially bind the Customer of Record. I further certify that my Agent has authority to act on my behalf and request the release of information for the accounts listed on this form and perform the specific acts and functions listed above. I understand the Utility reserves the right to verify any authorization request submitted before releasing information or taking any action on my behalf. I authorize the Utility to release the requested information on my account or facilities to the above Agent who is acting on my behalf regarding the matters listed above. I hereby release, hold harmless, and indemnify the Utility from any liability, claims, demands, causes of action, damages, or expenses resulting from: 1) any release of information to my Agent pursuant to this Authorization; 2) the unauthorized use of this information by my Agent; and 3) from any actions taken by my Agent pursuant to this Authorization, including rate changes. I understand that I may cancel this authorization at any time by submitting a written request. [This form must be signed by someone who has authority to financially bind the customer (for example, CFO of a company or City Manager of a municipality).]

AUTHORIZED CUSTOMER SIGNATURE

Executed this _____ day of _____
MONTH YEAR

TELEPHONE NUMBER

at _____
CITY AND STATE WHERE EXECUTED

I (Agent), hereby release, hold harmless, and indemnify the Utility from any liability, claims, demand, causes of action, damages, or expenses resulting from the use of customer information obtained pursuant to this authorization and from the taking of any action pursuant to this authorization, including rate changes.

AGENT SIGNATURE

TELEPHONE NUMBER

COMPANY

Executed this _____ day of _____
MONTH YEAR

PACIFIC GAS AND ELECTRIC COMPANY

AUTHORIZATION TO RECEIVE CUSTOMER INFORMATION OR ACT UPON A
CUSTOMER'S BEHALF (SPANISH)
FORM NO. 79-1096 (03/07)
(ATTACHED)

(N)

$$(N)$$

Advice Letter No.	3015-E
Decision No.	

106391

Issued by
Brian K. Cherry
Vice President
Regulatory Relations

Date Filed March 27, 2007
Effective _____
Resolution No. _____

AUTORIZACIÓN PARA RECIBIR INFORMACIÓN DE UN CLIENTE O ACTURA EN REPRESENTACIÓN DE UN CLIENTE

EL PRESENTE ES UN CONTRATO JURÍDICAMENTE VINCULANTE. LÉALO DETENIDAMENTE
(Por favor, escriba a máquina o con letra de imprenta)

Yo _____
NOMBRE PUESTO (SI ES PERTINENTE)

de _____ (Cliente) tiene la siguiente dirección postal
NOMBRE DEL CLIENTE REGISTRADO

_____, y a través del presente designo a
DIRECCIÓN POSTAL CIUDAD ESTADO CÓDIGO POSTAL

de _____
NOMBRE DEL TERCERO DIRECCIÓN POSTAL

CIUDAD ESTADO CÓDIGO POSTAL

para actuar como mi agente y asesor (Agente) para la(s) cuenta(s) que aparece(n) listada(s) y en las categorías indicadas más adelante:

CUENTAS INCLUIDAS EN ESTA AUTORIZACIÓN:

1. _____
DIRECCIÓN DEL SERVICIO CIUDAD NÚMERO DE CUENTA DEL SERVICIO
2. _____
DIRECCIÓN DEL SERVICIO CIUDAD NÚMERO DE CUENTA DEL SERVICIO
3. _____
DIRECCIÓN DEL SERVICIO CIUDAD NÚMERO DE CUENTA DEL SERVICIO

(Para más de tres cuentas, por favor enumere las cuentas adicionales en una hoja de papel por separado y adjúntela a este formulario)

INFORMACIÓN, FUNCIONES Y ACTOS AUTORIZADOS – Esta autorización le proporciona autoridad al Agente. Subsecuentemente, el Agente debe suministrar instrucciones/solicitudes específicas por escrito (el uso de E-mail es aceptable) acerca de la(s) cuenta(s) particular(es) antes de que alguna información sea divulgada o una acción sea llevada a cabo. Bajo algunas circunstancias, la función o acto solicitado podría incurrir en un costo para usted, el cliente. Las solicitudes de información podrían estar limitadas al periodo de 12 meses más reciente.

Yo (Cliente) autorizo a mi Agente a actuar en representación mía en el desempeño de los siguientes actos y funciones específicos (escriba sus iniciales en todos los casilleros pertinentes):

- ☐ 1. Solicitar y recibir expedientes de facturación, el historial de facturación y todos los datos de medición del consumo que son utilizados para calcular el monto de las facturas de la totalidad de mi(s) cuenta(s), tal como se especifique en el presente, en relación con los servicios públicos suministrados por la Compañía de Servicios Públicos¹.
- ☐ 2. Solicitar y recibir copias de correspondencia relacionada con mi(s) cuenta(s) relativas a (ponga sus iniciales en todas las respuestas pertinentes):
 - ☐ a. Verificación de tarifas, fecha de cambio de tarifas e información relacionada;
 - ☐ b. Contratos y Convenios de Servicio;
 - ☐ c. Emisión previa o propuesta de ajustes/créditos; o
 - ☐ d. Otros ajustes de facturación no resueltos/en disputa que hayan sido emitidos previamente.
- ☐ 3. Solicitar una investigación de mi(s) cuenta(s) de servicios públicos.
- ☐ 4. Solicitar una medición especial, y el derecho a tener acceso a información de consumo en intervalos y otra información de medición relacionada con mi(s) cuenta(s).
- ☐ 5. Solicitar un análisis de tarifas.
- ☐ 6. Solicitar modificaciones en las tarifas.
- ☐ 7. Solicitar y recibir verificación de los saldos de mi(s) cuenta(s) y notificaciones de interrupción del servicio.

¹ La Compañía de Servicios Públicos proporciona información estándar sobre el cliente sin costo alguno hasta dos veces en un periodo de 12 meses por cuenta del servicio. Después de dos solicitudes en un año, comprendo que podría ser responsable de los cargos en lo que se podría incurrir para tramitar esta solicitud.

AUTORIZACIÓN PARA RECIBIR INFORMACIÓN DE UN CLIENTE O ACTUAR EN REPRESENTACIÓN DE UN CLIENTE

YO (CLIENTE) AUTORIZO LA DIVULGACIÓN DE LA INFORMACIÓN SOBRE MI CUENTA Y AUTORIZO A MI AGENTE A ACTUAR EN REPRESENTACIÓN MÍA DE LA SIGUIENTE MANERA² (ponga sus iniciales únicamente en un casillero):

² Si no se especifica un límite de tiempo, la autorización estará limitada a una sola ocasión

- ☐ Autorización para una ocasión únicamente (limitada a una sola solicitud de información y/o los actos y funciones especificados anteriormente al momento de recibir esta Autorización).
- ☐ Autorización durante un año – Las solicitudes de información y/o para los actos y funciones especificados anteriormente serán aceptados y tramitados cada vez que sean solicitados dentro de un periodo de doce meses a partir de la fecha de firma de esta Autorización.
- ☐ Se otorga la Autorización durante el periodo que inicia a partir de la fecha de firma de esta Autorización hasta _____ (Duración limitada a tres años a partir de la fecha de firma de esta Autorización.) Las solicitudes de información y/o para los actos y funciones especificados anteriormente serán aceptados y tramitados cada vez que sean solicitados dentro del periodo de vigencia de la Autorización especificado en el presente.

DIVULGACIÓN DE LA INFORMACIÓN SOBRE LA CUENTA:

La Compañía de Servicios Públicos proporcionará la información solicitada anteriormente, en el grado en el que esté disponible, a través de uno de los siguientes medios. El formato que prefiero (prefiere mi Agente) es (marque todas las respuestas correspondientes)

- ☐ Copia impresa a través del Servicio de Correos de Los EE.UU. (de ser pertinente).
- ☐ Documento por fax a este número telefónico: _____
- ☐ Formato electrónico a través de E-mail (de ser pertinente) a esta dirección de E-mail: _____

Yo (El Cliente), _____ (nombre del signatario autorizado en letra de imprenta), declaro bajo pena de perjurio según lo dispuesto por las leyes del Estado de California que estoy autorizado para firmar este documento en representación del Cliente Registrado que aparece indicado en la parte superior de este formulario, y que poseo la autoridad para obligar financieramente al Cliente Registrado. Asimismo, también certifico que mi Agente posee la autoridad para actuar en representación mía y solicitar la divulgación de información sobre las cuentas indicadas en este formulario y desempeñar los actos y funciones específicos indicados anteriormente. Comprendo que la Compañía de Servicios Públicos se reserva el derecho de verificar toda solicitud de autorización presentada antes de divulgar información o desempeñar algún acto en representación mía. Autorizo a la Compañía de Servicio Público a divulgarle la información solicitada sobre mi cuenta o instalaciones al Agente mencionado anteriormente quien actúa en representación mía en lo relacionado con los asuntos indicados anteriormente. A través del presente, libero de responsabilidad e indemnizo a la Compañía de Servicios Públicos de toda responsabilidad, reclamación, demanda, antecedente de acción judicial, daño o gasto que pudiera resultar de: 1) cualquier divulgación de información a mi Agente de conformidad con esta Autorización; 2) el uso autorizado de esta información por parte de mi Agente; y 3) cualquier acción tomada por mi Agente de conformidad con esta Autorización, incluyendo modificaciones en las tarifas. Comprendo que puedo cancelar esta Autorización en cualquier momento con tan sólo presentar una solicitud por escrito. [Este formulario debe estar firmado por una persona que posea la autoridad de obligar financieramente al cliente (por ejemplo, el Director Financiero de una compañía o el Administrador Municipal de una municipalidad).]

FIRMA DEL CLIENTE AUTORIZADO

Firmado este día _____ de _____ de _____
MES AÑO

NÚMERO TELEFÓNICO

en _____
CIUDAD Y ESTADO DONDE ES FIRMADO

Yo (El Agente), a través del presente libero de responsabilidad e indemnizo a la Compañía de Servicios Públicos de toda responsabilidad, reclamación, demanda, antecedente de acción judicial, daño o gasto que pudiera resultar del uso de la información sobre el cliente obtenida de conformidad con esta autorización y de desempeñar cualquier acción de conformidad con esta autorización, incluyendo la modificación de las tarifas.

FIRMA DEL AGENTE

NÚMERO TELEFÓNICO

COMPañÍA

Firmado este día _____ de _____ de _____
MES AÑO

PACIFIC GAS AND ELECTRIC COMPANY
REQUEST CHANGE OF MAILING ADDRESS TO A THIRD PARTY CHANGE OF
ADDRESS
FORM NO. 79-1097 (03/07)
(ATTACHED)

$$\begin{array}{c} (\text{N}) \\ | \\ | \\ | \\ | \\ (\text{N}) \end{array}$$

Advice Letter No.	3015-E
Decision No.	

106392

Issued by
Brian K. Cherry
Vice President
Regulatory Relations

Date Filed March 27, 2007
Effective _____
Resolution No. _____

REQUEST CHANGE OF MAILING ADDRESS TO A THIRD PARTY CHANGE OF ADDRESS

(Please Type or Print)

1. CUSTOMER INFORMATION:

CUSTOMER/COMPANY NAME

MAILING ADDRESS

CITY STATE ZIP

() _____ () _____
TELEPHONE NUMBER FACSIMILE NUMBER

2. REQUESTED CHANGE TO MAILING ADDRESS (In order for this form to be processed, all of the following information must be provided):

INFORMATION RECIPIENT

C/O

COMPANY NAME (If Applicable)

MAILING ADDRESS

CITY STATE ZIP

() _____ () _____
TELEPHONE NUMBER FACSIMILE NUMBER

CHANGE OF MAILING ADDRESS SHOULD TAKE EFFECT ON _____.
DATE

3. ACCOUNTS INCLUDED IN THIS REQUEST:

ADDRESS CITY SERVICE ACCOUNT NUMBER

ADDRESS CITY SERVICE ACCOUNT NUMBER

ADDRESS CITY SERVICE ACCOUNT NUMBER

(For more than three accounts, please list additional accounts on a separate sheet and attach it to this form.)

REQUEST FOR CHANGE OF MAILING ADDRESS TO A THIRD PARTY ADDRESS (Cont.)

4. By signing below, Customer and Information Recipient acknowledge that account information affected by this request for change of mailing address includes all utility bills (gas and/or electric), bill inserts, discontinuance notices, and other information normally sent to the mailing address on an account(s).

If Pacific Gas and Electric Company (the Company) becomes aware of returned bills, or that the Information Recipient is no longer at the address specified on this form or is repackaging the Company's bill and other information transmitted therewith in a manner unacceptable to the Company, the Company will immediately and without prior notification to Customer or Information Recipient terminate this authorization and revert the mailing address to the Customer's service address, or other mailing address if in the Company's possession and available.

5. I, (Information Recipient), understand that this change of address form authorization does not confer any rights or privileges to act on the customer's behalf. Further, I agree that I will not reorganize or repackage the Company's bill, or other information transmitted therewith, without first providing the reformatted or repackaged bill or information transmitted therewith to the Company. I understand that no reorganizing or repackaging of said information is permitted by the Company without its prior written consent. I release, hold harmless, and indemnify the Company from any claims, damages or expenses resulting from the unauthorized use of this account information, and from the customer's failure to receive the bill, legal and safety notices, discontinuance and other notices, bill inserts and other related rate information. I will not provide this information to other parties without customer authorization.

INFORMATION RECIPIENT

ADDRESS

INFORMATION RECIPIENT SIGNATURE

CITY, STATE, ZIP

6. I, (Customer/Company), authorize the Company to change the mailing address on the accounts listed on this form. I understand that, as a result of this change of address request, I may no longer receive the bill, legal and safety notices, discontinuance and other notices, bill inserts, and other related rate information. I further understand and represent that this change of address form authorization does not confer any rights or privileges upon the third party bill information recipient to act on my behalf. I release, hold harmless, and indemnify the Company from any claims, damages or expenses associated with my failure to receive the bill, legal and safety notices, discontinuance and other notices, bill inserts, and other related rate information and from the unauthorized use of this account information. I further understand that if I should pay the information recipient or any other third party for charges owed to Pacific Gas and Electric Company as a result of the use of this form I will continue to be ultimately responsible for the payment of those charges to Pacific Gas and Electric Company until the payment is forwarded to Pacific Gas and Electric Company by the information recipient or other third party. If the information recipient or other third party fails to pay Pacific Gas and Electric Company in accordance with the Company's Rule 11 (discontinuance procedures) for any reason, I understand that I will be responsible for the payment of those utility charges to Pacific Gas and Electric Company. I further certify that I have authority to authorize the change of address for the accounts listed on this form.

AUTHORIZED CUSTOMER/COMPANY NAME

DEPARTMENT

AUTHORIZED SIGNATURE

TITLE

DATE



TABLE OF CONTENTS

Sample Forms Rule 2 Description of Service

SCHEDULE	TITLE OF SHEET	CAL P.U.C. SHEET NO.
79-255	Agreement for Installation or Allocation of Special Facilities	7689-E

Sample Forms Rule 3 Application of Service

02-2590	Interim Service Agreement.....	26231-E	(T)
62-3282	Request for Service.....	26232-E	(T)
62-0683	Application for Service - Residential Service.....	24052-E	
62-0684	Application for Service - Residential Subdivision/Development	24053-E	
62-0685	Application for Service - Commercial/Industrial Development.....	24054-E	
62-0686	Application for Service - Agricultural Service	24055-E	
62-0687	Application for Relocation/Rearrangement.....	22693-E	
79-972	Agreement for Unmetered Electrical Service	25055-E	
79-1038	Application for Essential Use Customer Status.....	23599-E	
79-1095	Authorization to Receive Customer Information or Act on Behalf of Customer	26233-E	(N)
79-1096	Authorization to Receive Customer Information or Act on Behalf of Customer (Spanish).....	26234-E	(N)
79-1095	Request Change of Mailing Address to a Third Party Change of Address.....	26235-E	(N)

Sample Forms Rule 13 Temporary Service

79-875	Rule 13 Temporary Service Agreement	22473-E
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Sample Forms Rules 15 and 16 Distribution Line and Service Extensions

62-0980	Distribution and Service Extension Agreement	18156, 24046-E
62-0981	Distribution and Service Extension Agreement, Option 1 - Shared Construction	15613-E
62-0982	Distribution and Service Extension Agreement, Option 2 - Competitive Bidding.....	21557-E
79-716	General Terms and Conditions for Gas and Electric Extension and Service Construction by Applicant	21667-E
79-1003	Statement of Applicant's Contract of Anticipated Costs	21668-E
79-1004	Distribution and Service Extension Agreement - Exhibit A Cost Summary	21830-E
79-1018	Residential Rule 16 Electric/Gas Single Service Extensions	22107-E
79-1020	Internal Combustion Engine Conversion Incentive Distribution and Service Extension Agreement	23650-E
79-1021	General Terms and Condition for Internal Combustion Incentive Electric Extension and Service Construction by Applicant	23651-E
79-1022	Internal Combustion Engine Conversion Incentive Distribution Service and Extension Billing Letter.....	23652-E
79-1023	Application for Service - Internal Combustion Engine Conversion Incentive - Agricultural Service	23653-E



Pacific Gas and Electric Company
San Francisco, California

Cancelling

Revised
Revised

Cal. P.U.C. Sheet No. 26237-E
25712-E

TABLE OF CONTENTS

Table of Contents

SCHEDULE	TITLE OF SHEET	CAL P.U.C. SHEET NO.
Title Page		25712-E
Rate Schedules	25459, 25591, 25946, 25945, 25709-E	
Preliminary Statements	25901, 25898, 25661, 25460-E	
Rules		25588-E
Sample Forms	 26236 , 25586, 25875-25876, 25947, 25711, 25878-E	(T)

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**PG&E Gas and Electric Advice
Filing List
General Order 96-A, Section III(G)**

ABAG Power Pool
Accent Energy
Aglet Consumer Alliance
Agnews Developmental Center
Ahmed, Ali
Alcantar & Kahl
Ancillary Services Coalition
Anderson Donovan & Poole P.C.
Applied Power Technologies
APS Energy Services Co Inc
Arter & Hadden LLP
Avista Corp
Barkovich & Yap, Inc.
BART
Bartle Wells Associates
Blue Ridge Gas
Bohannon Development Co
BP Energy Company
Braun & Associates
C & H Sugar Co.
CA Bldg Industry Association
CA Cotton Ginners & Growers Assoc.
CA League of Food Processors
CA Water Service Group
California Energy Commission
California Farm Bureau Federation
California Gas Acquisition Svcs
California ISO
Calpine
Calpine Corp
Calpine Gilroy Cogen
Cambridge Energy Research Assoc
Cameron McKenna
Cardinal Cogen
Cellnet Data Systems
Chevron Texaco
Chevron USA Production Co.
City of Glendale
City of Healdsburg
City of Palo Alto
City of Redding
CLECA Law Office
Commerce Energy
Constellation New Energy
CPUC
Cross Border Inc
Crossborder Inc
CSC Energy Services
Davis, Wright, Tremaine LLP
Defense Fuel Support Center
Department of the Army
Department of Water & Power City
DGS Natural Gas Services

Douglass & Liddell
Downey, Brand, Seymour & Rohwer
Duke Energy
Duke Energy North America
Duncan, Virgil E.
Dutcher, John
Dynergy Inc.
Ellison Schneider
Energy Law Group LLP
Energy Management Services, LLC
Exelon Energy Ohio, Inc
Exeter Associates
Foster Farms
Foster, Wheeler, Martinez
Franciscan Mobilehome
Future Resources Associates, Inc
G. A. Krause & Assoc
Gas Transmission Northwest Corporation
GLJ Energy Publications
Goodin, MacBride, Squeri, Schlotz &
Hanna & Morton
Heeg, Peggy A.
Hitachi Global Storage Technologies
Hogan Manufacturing, Inc
House, Lon
Imperial Irrigation District
Integrated Utility Consulting Group
International Power Technology
Interstate Gas Services, Inc.
IUCG/Sunshine Design LLC
J. R. Wood, Inc
JTM, Inc
Luce, Forward, Hamilton & Scripps
Manatt, Phelps & Phillips
Marcus, David
Matthew V. Brady & Associates
Maynor, Donald H.
MBMC, Inc.
McKenzie & Assoc
McKenzie & Associates
Meek, Daniel W.
Mirant California, LLC
Modesto Irrigation Dist
Morrison & Foerster
Morse Richard Weisenmiller & Assoc.
Navigant Consulting
New United Motor Mfg, Inc
Norris & Wong Associates
North Coast Solar Resources
Northern California Power Agency
Office of Energy Assessments
OnGrid Solar
Palo Alto Muni Utilities

PG&E National Energy Group
Pinnacle CNG Company
PITCO
Plurimi, Inc.
PPL EnergyPlus, LLC
Praxair, Inc.
Price, Roy
Product Development Dept
R. M. Hairston & Company
R. W. Beck & Associates
Recon Research
Regional Cogeneration Service
RMC Lonestar
Sacramento Municipal Utility District
SCD Energy Solutions
Seattle City Light
Sempra
Sempra Energy
Sequoia Union HS Dist
SESCO
Sierra Pacific Power Company
Silicon Valley Power
Smurfit Stone Container Corp
Southern California Edison
SPURR
St. Paul Assoc
Sutherland, Asbill & Brennan
Tabors Caramanis & Associates
Tecogen, Inc
TFS Energy
Transcanada
Turlock Irrigation District
U S Borax, Inc
United Cogen Inc.
URM Groups
Utility Cost Management LLC
Utility Resource Network
Wellhead Electric Company
White & Case
WMA