National Grid USA – Rhode Island Online Interval Data Request Form To be completed by Supplier/Rroker

To be completed by Supplier/Broker			
C (N () () () () () () ()			
Customer Name (as it appears on the bill):			

Numbers	Billing Name	Service Address
Please attach additional attached".	l accounts as needed, and referenc	re accordingly in the table above with "see
Supplier/Broker Na	me:	
Supplier/Broker Con	ntact Email Address:	
Supplier/Broker Signat	ure:	Date:
Supplier Billing Addre	ss	
notifies you otherwise ¹ .	company to share my interval data with	the above supplier/broker until I or my supplier/broker
The tariff allows for one request for any subsequent request made		cal data at no charge. I understand that a fee will be assessed
to accept this form as authentic w	whether it is the original executed docum	a as if the request was made directly to you. You are permitted ment or a copy thereof. My signature affirms that I have the
to accept this form as authentic wauthority to make and sign this re *Customer Signature	whether it is the original executed docum	
to accept this form as authentic wanthority to make and sign this re *Customer Signature *Printed Name	whether it is the original executed docum	
to accept this form as authentic wauthority to make and sign this re *Customer Signature *Printed Name *Title	whether it is the original executed docum	
to accept this form as authentic wauthority to make and sign this re *Customer Signature *Printed Name	whether it is the original executed docum	
to accept this form as authentic wauthority to make and sign this re *Customer Signature *Printed Name *Title *Company Name	whether it is the original executed docum	
*Customer Signature *Printed Name *Title *Company Name *Date (required) 1	whether it is the original executed documquest on behalf of my company.	
*Customer Signature *Printed Name *Title *Company Name *Date (required) 1	whether it is the original executed docum quest on behalf of my company. Request – Please choose just	one (see fee schedule on next page) ine Auto-Renewing, One Year
*Customer Signature *Customer Signature *Printed Name *Title *Company Name *Date (required) Type of Interval Data F Two Weeks Onli Access to Data	Request – Please choose just of the Company of the	one (see fee schedule on next page) ine Auto-Renewing, One Year

¹ Customer signature is only valid for one year after the signing date.

National Grid USA – Rates for Interval Data Access

12 Months of Historical Data

Initial Request for each account within the Calendar Year:	No Charge	
Subsequent Request for accounts within the Calendar Year		
First account requested	\$ 83.00	
Each additional account included with same request	\$ 6.41	
One Year Access to Interval Data via Energy Profiler Online		
First account requested	\$154.00	
• Each additional account included with same request	\$ 76.89	