



ADVICE LETTER SUMMARY



ENERGY UTILITY

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

Company name/CPUC Utility No.: Liberty Utilities (CalPeco Electric) LLC (U-933 E)

Utility type:

- ELC GAS WATER
 PLC HEAT

Contact Person: Greg Campbell
 Phone #: 562-299-5117
 E-mail: Greg.Campbell@libertyutilities.com
 E-mail Disposition Notice to: Greg.Campbell@libertyutilities.com

EXPLANATION OF UTILITY TYPE
 ELC = Electric GAS = Gas WATER = Water
 PLC = Pipeline HEAT = Heat

(Date Submitted / Received Stamp by CPUC)

Advice Letter (AL) #: 105-E

Tier Designation: Tier 1

Subject of AL: Language Change and Discontinuation of Forms

Keywords (choose from CPUC listing):

AL Type: Monthly Quarterly Annual One-Time Other:

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

Does AL replace a withdrawn or rejected AL? If so, identify the prior AL: N/A

Summarize differences between the AL and the prior withdrawn or rejected AL: N/A

Confidential treatment requested? Yes No

If yes, specification of confidential information:

Confidential information will be made available to appropriate parties who execute a nondisclosure agreement. Name and contact information to request nondisclosure agreement/ access to confidential information:

Resolution required? Yes No

Requested effective date: 9/19/18

No. of tariff sheets: N/A

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: N/A

Service affected and changes proposed¹: N/A

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

¹Discuss in AL if more space is needed.

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

CPUC, Energy Division
Attention: Tariff Unit
505 Van Ness Avenue
San Francisco, CA 94102
Email: EDTariffUnit@cpuc.ca.gov

Name: Greg Campbell
Title: Sr. Rate Analyst
Utility Name: Liberty Utilities (CalPeco Electric) LLC
Address: 9750 Washbur Road
City: Downey State: California
Telephone (xxx) xxx-xxxx: 562-299-5117
Facsimile (xxx) xxx-xxxx:
Email: Greg.Campbell@libertyutilities.com

Name:
Title:
Utility Name:
Address:
City: State: Wyoming
Telephone (xxx) xxx-xxxx:
Facsimile (xxx) xxx-xxxx:
Email:

Clear Form

ENERGY Advice Letter Keywords

Affiliate	Direct Access	Preliminary Statement
Agreements	Disconnect Service	Procurement
Agriculture	ECAC / Energy Cost Adjustment	Qualifying Facility
Avoided Cost	EOR / Enhanced Oil Recovery	Rebates
Balancing Account	Energy Charge	Refunds
Baseline	Energy Efficiency	Reliability
Bilingual	Establish Service	Re-MAT/Bio-MAT
Billings	Expand Service Area	Revenue Allocation
Bioenergy	Forms	Rule 21
Brokerage Fees	Franchise Fee / User Tax	Rules
CARE	G.O. 131-D	Section 851
CPUC Reimbursement Fee	GRC / General Rate Case	Self Generation
Capacity	Hazardous Waste	Service Area Map
Cogeneration	Increase Rates	Service Outage
Compliance	Interruptible Service	Solar
Conditions of Service	Interutility Transportation	Standby Service
Connection	LIEE / Low-Income Energy Efficiency	Storage
Conservation	LIRA / Low-Income Ratepayer Assistance	Street Lights
Consolidate Tariffs	Late Payment Charge	Surcharges
Contracts	Line Extensions	Tariffs
Core	Memorandum Account	Taxes
Credit	Metered Energy Efficiency	Text Changes
Curtable Service	Metering	Transformer
Customer Charge	Mobile Home Parks	Transition Cost
Customer Owned Generation	Name Change	Transmission Lines
Decrease Rates	Non-Core	Transportation Electrification
Demand Charge	Non-firm Service Contracts	Transportation Rates
Demand Side Fund	Nuclear	Undergrounding
Demand Side Management	Oil Pipelines	Voltage Discount
Demand Side Response	PBR / Performance Based Ratemaking	Wind Power
Deposits	Portfolio	Withdrawal of Service
Depreciation	Power Lines	



Liberty Utilities (CalPeco Electric) LLC
933 Eloise Avenue
South Lake Tahoe, CA 96150
Tel: 800-782-2506
Fax: 530-544-4811

September 19, 2018

VIA EMAIL AND FEDEX DELIVERY

**Advice Letter 105-E
(U 933-E)**

California Public Utilities Commission
Energy Division, Tariff Unit
505 Van Ness Avenue, 4th Floor
San Francisco, CA 94102-3298

Subject: Liberty Utilities (CalPeco Electric) LLC (U 933-E) – Language Change and Discontinuation of Forms

Purpose

Liberty Utilities (CalPeco Electric) LLC (U 933-E) (“Liberty CalPeco”) submits this **Tier 1** Advice Letter to revise language and discontinue application in its associated service forms. The following forms are being revised:

1. Authorization to Release Medical Information – English
2. Authorization to Release Medical Information – Spanish
3. Residential Service Authorization – Business Name

A redline and clean version of the impacted Residential Service Authorization Form is included in the Attachments section. The Authorization to Release Medical Information – English/Spanish Forms will be removed from the Liberty CalPeco website.

Discussion

This Advice Letter updates language found within Liberty CalPeco’s Residential Service Authorization – Business Name Form and discontinues application of the Authorization to Release Medical Information – English/Spanish Forms.

1. Residential Service Authorization – Business Name. The revision to the form now requires the customer (LLC LLP entity) to provide a copy of the business license with the application upon submittal.

2. Authorization to Release Medical Information – English/Spanish. Both of the Authorization to Release Medical Information – English & Spanish as part of the Green Cross Medical Baseline forms will now be discontinued and removed from the Liberty CalPeco website.

Effective Date

Liberty CalPeco requests that this **Tier 1** Advice Letter be effective as of September 19, 2018.

Protests

Anyone wishing to protest this Advice Letter may do so by letter sent via U.S. Mail, by facsimile or by email, any of which must be received no later than October 9, 2018, which is 20 days after the date of this Advice Letter. There are no restrictions on who may submit a protest, but the protest shall set forth the grounds upon which it is based and shall be submitted expeditiously.

Protests should be mailed to:

California Public Utilities Commission
Energy Division, Tariff Unit
505 Van Ness Avenue, 4th Floor
San Francisco, CA 94102-3298
Facsimile: (415) 703-2200
Email: edtariffunit@cpuc.ca.gov

The protest should be sent via email and U.S. Mail (and by facsimile, if possible) to Liberty Utilities (CalPeco Electric) LLC at the address shown below on the same date it is mailed or delivered to the Commission:

Liberty Utilities (CalPeco Electric) LLC
Attn: Advice Letter Protests
933 Eloise Avenue
South Lake Tahoe, CA 96150
Fax: 530-544-4811
Email: Greg.Campbell@libertyutilities.com

Notice

In accordance with General Order 96-B, Section 4.3, a copy of this Advice Letter is being sent electronically to parties shown on the attached list.

Energy Division Tariff Unit
California Public Utilities Commission
September 19, 2018
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If additional information is required, please do not hesitate to contact me.

Respectfully submitted,

LIBERTY UTILITIES (CALPECO ELECTRIC) LLC

/s/ Greg Campbell

Greg Campbell

Liberty Utilities (CalPeco Electric) LLC

Rate Analyst, Rates and Regulatory Affairs

Phone: 562-299-5117

Email: Greg.Campbell@libertyutilities.com

Attachments

cc: Liberty CalPeco Advice Letter Service List

Liberty Utilities (CalPeco Electric) LLC
Advice Letter Filing Service List
General Order 96-B, Section 4.3

VIA EMAIL

gbinge@ktminc.com;
emello@sppc.com;
epoole@adplaw.com;
cem@newsdata.com;
rmccann@umich.edu;
sheila@wma.org;
abb@eslawfirm.com;
cbk@eslawfirm.com;
bhodgeusa@yahoo.com;
chilen@nvenergy.com;
phanschen@mofo.com;
liddell@energyattorney.com;
cem@newsdata.com;
dietrichlaw2@earthlink.net;
ericj@eslawfirm.com;
clerk-recorder@sierracounty.ws;
plumascoco@gmail.com;
marshall@psln.com;
stephenhollabaugh@tdpud.org;
gross@portersimon.com;
mccluretahoe@yahoo.com;
catherine.mazzeo@swgas.com;
Theresa.Faegre@libertyutilities.com;
SDG&ETariffs@semprautilities.com;
greg.campbell@libertyutilities.com

AdviceTariffManager@sce.com;
edtariffunit@cpuc.ca.gov;
jrw@cpuc.ca.gov;
rmp@cpuc.ca.gov;
jaime.gannon@cpuc.ca.gov;
mas@cpuc.ca.gov;
txb@cpuc.ca.gov;
efr@cpuc.ca.gov;
tlg@cpuc.ca.gov;
dao@cpuc.ca.gov;
ljt@cpuc.ca.gov;
mmg@cpuc.ca.gov;
kjl@cpuc.ca.gov;
denise.tyrrell@cpuc.ca.gov;
fadi.daye@cpuc.ca.gov;
winnie.ho@cpuc.ca.gov;
usrb@cpuc.ca.gov;
Rob.Oglesby@energy.ca.gov;
stevegreenwald@dwt.com;
vidhyaprabhakaran@dwt.com;
judypau@dwt.com;
dwtcpucdockets@dwt.com;
patrickferguson@dwt.com;
travis.ritchie@sierraclub.org
dan.marsh@libertyutilities.com

**Attachment 1: Clean Copy of Residential Service
Authorization – Business Name**

**Attachment 2: Redline Copy of Residential Service
Authorization – Business Name**



RESIDENTIAL SERVICE AUTHORIZATION

Business Name

PLEASE TYPE OR PRINT

Previous Customer of Record (*if known*): _____

Service Address: _____ Date Service is Required: _____

Applicant(s) accepts responsibility for payment of utility service(s) at the rates and charges contained in the utility company rate schedules and agrees to abide by the utility company rules and regulations specifically relating to the purchase and sale of said service(s), a copy of which is available for review at any company customer business office. Applicant(s) authorizes Liberty to verify all information on this authorization form.

To apply for Residential utility service using a Business Name the following items must be submitted:

1. Residential Service Authorization – Business Name form
2. Copy of Business License (if not available, a copy of the Business License application and paid Business License application receipt may be provided).

Please contact your local customer business office at least three (3) working days in advance to stop your service(s), otherwise the monthly billing will continue in your name and you will be responsible for all charges that may incur.

If this address has Outside Lighting Service, do you want it on? Yes No

Is anyone in the household elderly or disabled? Yes No

Do you have a dog on the premises? Yes No

APPLICANTS AGREES TO PROVIDE ACCESS TO THE METER(S) AT ALL TIMES

Please establish electric service under the following business:

Business / Entity Name: _____

Type of Business / Entity: _____

Name of Contact: _____ Contact Phone Number: _____

Federal Tax ID #: _____ and/or Social Security #: _____

Billing Address: _____

City: _____ State: _____ Zip Code: _____

Phone Number: _____ Fax Number: _____

E-mail Address: _____

Customer(s) is (*check one*): Owner Tenant

I am the authorized agent and I am acting in the business's behalf.

Agency Business Name: _____ Phone #: _____

Agent's Name (*please print*): _____

Agent's Signature: _____

FOR LIBERTY UTILITIES USE ONLY

Date Order Entered: _____ Emp. Initials/ID#: _____

Phone #: 800.782.2506

South Lake Tahoe Fax #: 530.544.4811

North Lake Tahoe Fax #: 530.546-1017



RESIDENTIAL SERVICE AUTHORIZATION
Business Name

PLEASE TYPE OR PRINT

Previous Customer of Record (if known): _____

Service Address: _____ Date Service is Required: _____

Applicant(s) accepts responsibility for payment of utility service(s) at the rates and charges contained in the utility company rate schedules and agrees to abide by the utility company rules and regulations specifically relating to the purchase and sale of said service(s), a copy of which is available for review at any company customer business office. Applicant(s) authorizes Liberty to verify all information on this authorization form.

To apply for Residential utility service using a Business Name the following items must be submitted:

- 1. Residential Service Authorization – Business Name form
2. Copy of Business License (if not available, a copy of the Business License application and paid Business License application receipt may be provided).

Please contact your local customer business office at least three (3) working days in advance to stop your service(s), otherwise the monthly billing will continue in your name and you will be responsible for all charges that may incur.

If this address has Outside Lighting Service, do you want it on? Yes [] No []
Is anyone in the household elderly or disabled? Yes [] No []
Do you have a dog on the premises? Yes [] No []

APPLICANTS AGREES TO PROVIDE ACCESS TO THE METER(S) AT ALL TIMES

Please establish electric service under the following business:

Business / Entity Name: _____

Type of Business / Entity: _____

Name of Contact: _____ Contact Phone Number: _____

Federal Tax ID #: _____ and/or Social Security #: _____

Billing Address: _____

City: _____ State: _____ Zip Code: _____

Phone Number: _____ Fax Number: _____

E-mail Address: _____

Customer(s) is (check one): [] Owner [] Tenant

I am the authorized agent and I am acting in the business's behalf.

Agency Business Name: _____ Phone #: _____

Agent's Name (please print): _____

Agent's Signature: _____

FOR LIBERTY UTILITIES USE ONLY

Date Order Entered: _____ Emp. Initials/ID#: _____

Phone #: 800.782.2506
South Lake Tahoe Fax #: 530.544.4811 North Lake Tahoe Fax #:530.546-1017

FedEx Tracking Number **8117 7877 5242**

SLAE

Form ID No. **0215**

Sender's Copy

1 From *Please print and press hard.*
 Date **9-19-18** Sender's FedEx Account Number **SENDER'S FED 1177-0520-0014**
 Sender's Name **Greg Campbell** Phone (**562**) **923-0711**
 Company **PARK WATER CO**
 Address **9750 WASHBURN RD**
 City **DOWNEY** State **CA** ZIP **90241-5641**

2 Your Internal Billing Reference **AL-105-E**
 First 24 characters will appear on invoice.

3 To
 Recipient's Name **Tariff Unit** Phone ()
 Company **CDUC, Energy Division**
 Address **505 Van Ness Ave**
 We cannot deliver to P.O. boxes or P.O. ZIP codes.
 Dept./Floor/Suite/Room
 Address
 Use this line for the HOLD location address or for continuation of your shipping address.
 City **San Francisco** State **CA** ZIP **94102**

0129054007

 **Ship it. Track it. Pay for it. All online.**
 Go to fedex.com.

4 Express Package Service *To most locations. **Packages up to 150 lbs.**
 For packages over 150 lbs., use the FedEx Express Freight US Airbill.

Next Business Day	2 or 3 Business Days
<input type="checkbox"/> FedEx First Overnight Earliest next business morning delivery to select locations. Friday shipments will be delivered on Monday unless Saturday Delivery is selected.	<input type="checkbox"/> FedEx 2Day A.M. Second business morning.* Saturday Delivery NOT available.
<input type="checkbox"/> FedEx Priority Overnight Next business morning.* Friday shipments will be delivered on Monday unless Saturday Delivery is selected.	<input checked="" type="checkbox"/> FedEx 2Day Second business afternoon.* Thursday shipments will be delivered on Monday unless Saturday Delivery is selected.
<input type="checkbox"/> FedEx Standard Overnight Next business afternoon.* Saturday Delivery NOT available.	<input type="checkbox"/> FedEx Express Saver Third business day.* Saturday Delivery NOT available.

5 Packaging *Declared value limit \$500.

FedEx Envelope* **FedEx Pak*** **FedEx Box** **FedEx Tube** **Other**

6 Special Handling and Delivery Signature Options Fees may apply. See the FedEx Service Guide.

Saturday Delivery
 NOT available for FedEx Standard Overnight, FedEx 2Day A.M., or FedEx Express Saver.

No Signature Required
 Package may be left without obtaining a signature for delivery.

Direct Signature
 Someone at recipient's address may sign for delivery.

Indirect Signature
 If no one is available at recipient's address, someone at a neighboring address may sign for delivery. For residential deliveries only.

Does this shipment contain dangerous goods?
 One box must be checked.
 No **Yes** As per attached Shipper's Declaration. **Yes** Shipper's Declaration not required. **Dry Ice** Dry Ice, 5 UN 1845 _____ x _____ kg
 Restrictions apply for dangerous goods — see the current FedEx Service Guide. **Cargo Aircraft Only**

7 Payment Bill to:

Enter FedEx Acct. No. or Credit Card No. below.

Sender Acct. No. in Section 1 will be billed. **Recipient** **Third Party** **Credit Card** **Cash/Check**

FedEx Acct. No. _____ Exp. Date _____
 Credit Card No. _____

Total Packages **1** **Total Weight** **2** lbs. **Total Declared Value*** \$ **0**.00

611

PULL AND RETAIN THIS COPY BEFORE AFFIXING TO THE PACKAGE. NO POUCH NEEDED.