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**Time-of-Use (TOU) Rate Application**

Account Holder’s Name \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Address \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ City \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Zip \_\_\_\_\_\_\_\_\_\_

Phone Number (with area code)\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Email Address \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

16-Digit Account Number from bill: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Current Rate Code (found on bill below Special Message; begins with letter E) \_\_\_\_\_\_\_

Is this your primary home? \_\_\_ Yes \_\_\_ No

What hours are you most active in your home/business? \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Are there any major appliances that can be turned *on* after 10pm? \_\_\_ Yes \_\_\_\_No

Look at your last Liberty Utilities bill. Under Account Activity, find the appropriate kWh number: \_\_\_\_\_\_\_\_\_ kWh Base Usage \_\_\_\_\_\_\_\_\_\_\_kWh Excess Usage

Are you a Net/Solar meter customer? \_\_\_ Yes \_\_\_\_ No (If yes, you are NOT eligible for the TOU rates.)

Do you own an electric vehicle that you charge at your home or business? \_\_\_ Yes \_\_\_ No

Can you charge that vehicle after 10 pm? \_\_\_ Yes \_\_\_ No

*For residential customers only:*

**If after the first 12-month period, Liberty Utilities finds that I have spent more on the TOU Rate than I would have spent on the standard rate, Liberty Utilities will refund the difference and restore me to the standard rate (if I choose). I acknowledge and understand that in order to receive the annual savings credit associated with being on the TOU rate, I am required to remain on the program for a full 12 months. Initials \_\_\_\_\_\_\_\_\_\_\_ Date \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**I have read, understand, and agree to the terms listed above. I certify that (1) I am the customer of record for the account shown above, (2) I understand and agree to the terms in Liberty Utilities’ tariff governing Time of Use rates, and (3) I request that Liberty Utilities transfer service under my account listed above to Time of Use rates. I understand that if I choose to return to my previous billing rate after 12 complete months of service, it is my responsibility to contact Liberty Utilities to request this change.**

**Signature \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**Printed Name \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_­\_\_\_\_\_\_\_\_\_\_\_ Date \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**Submit by email to:** [CATahoeBilling@libertyutilities.com](mailto:CATahoeBilling@libertyutilities.com) **or mail to: Liberty Utilities Billing Department, 933 Eloise Avenue, South Lake Tahoe, CA 96150 or bring to our SLT or Tahoe Vista office locations.**