ENROLLMENT FORM

PowerStream Energy Services

Provided by Alectra Energy Services Inc.

This form can be completed online. Visit https://ps-suite.myutility.net/portal/prod/
Forms/Form_Landing for a fast and convenient web form.

Note: Your first bill will include a one-time set up fee and security deposit. The deposit can be waived if you sign up for PAP.

CUSTOMER INFORMATION							
Service(s) Enrolled:	○ Electric	○ Water	○ Gas	○ HVAC	Unit Type:	Residential	○ Commercial
Resident's Name: (Account holder)					Closing Date:		
You Are The:	Owner Tenant If you are the tenant, provide unit owner's information below.						
Unit Owner's Name:							
Unit Owner's Contact:	C Phone: Email:						
Service Location:	Unit # at:						
Mailing Address: (If different to above)							
Email (if not unit owne	r):						
C Home:		€ work	c :		6	Cell:	
		SU	IB METERI	NG AGREEI	MENT		
I certify that I am the owner of the unit identified above (the "Resident") and I hereby authorize PowerStream Energy Services Inc. ("PESI") to register me as the named consumer and bill me on behalf of							
No Liability: The Resident acknowany of its affiliated, related, subs successors, or assigns, are assum of profits or revenues, business in including but not limited to punit unit sub-metering located in the Privacy: The Resident hereby corto PESI of his/her personal informservices being provided to the Ox Resident and including billing, an PESI considers might be of intere Confirmation Form and PESI's aglandlord, building manager, concagents, subcontractors and reprecontracts or payments (a "Purcha aforementioned purposes. For thidentifying information such as no status, usage or potential usage of investigations of the Resident for	idiary, or parent coing any liability to interruption loss, lotive or exemplary of Unit remains the pasents to the disclonation and the collimation and the collimation from the following the disconding fees are set to the Resident; reement with the Comminium developes esentatives; iii) PES aser"); or iv) such one purposes of the same, address, emain Utilities, or PESI'r purposes of appror	ompanies, nor ar the Resident un- iss of contract or lamages, however property of PESI. issure by his/her ection, handling exprovision to the did charges asso- ciii) financing or Downer. The Resi- er or condominite of current and pather persons white foregoing, the Resil address and to a sagreement with oval, maintenance	ny of their responder any circum ross of goods er caused. Ow landlord, build and use by Ple Owner or its ciated with consider further cum corporation to need to accessident's perselephone numer the Owner.	pective directors astances for any will or for any divership of Equiding manager, constitution of the building manages assumption by the iness in whole of consents to the consents to the consents of the con	s, officers, employee damages or loss wherect, indirect, consect pment: The Residen condominium development information, for of information repeated Resident of the Utin in part; and iv) other in perty and information in consists of financial information reasons grees that PESI and it	s, agents, shareholder atsoever, including be presented to the condominium for purposes of i) adrogarding metered usalilities; ii) offering the per one cessary purpose his/her personal infobilling and settlemented to the condominium and settlemented to the condominium and the condominium and settlemented to the condominium and utility usage and the connected with the usage are the connected with the owner. The condominium and the connected with the connected with the connected with the Owner. The connected with the connected with the connected with the Owner. The connected with the owner. The connected with the connected with the connected with the owner.	ers, representatives, but not limited to any loss or special damages, all equipment relating to corporation, as applicable, ministering the sub-metering ge of the Utilities by the expectation of the Resident of the Resident's promation to i) the Resident's personal to the result of the resident's financial or form financial and credit for the result of the result

		LIFE SAVING DEPENDENCY					
A Pacidant who requires	alactricity HVAC v	vater, or gas services because of r	modical or oth	or lifo-caving	needs (e σ		
-		by providing PESI with a medical c		_			
	•			_			
PESI listed below. Please also note that you should always have a sufficient back-up supply of electricity, HVAC, water, or gas as we do not control, and cannot guarantee, an uninterrupted supply of Utilities.							
Life Saving Equipmen							
(Describe)							
PRE-AUTHORIZED PAYMENT INFORMATION (OPTIONAL) Enjoy worry-free, on time payments through the convenience of our Pre-Authorized Payments Plan.							
If registering for Pre-Authorized payments, please include a void cheque with this confirmation form.							
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You, the payor, authorize PESI to debit the bank account identified below for payment of all charges arising under your account registered by PESI for the unit noted on this form. The debit will be automatically withdrawn from your designated bank account on the date indicated on each invoice issued by PESI for the Utilities.							
Account Type:	Personal	Account Holder:					
	Business	(if different to resident name)		I			
Financial Institution:			Account #:				
(Bank Name)			D I - # -				
Transit Number:			Bank #:				
(5 Digits)			(3 Digits)				
Bank Address:							
Signature:							
(Account holder)			Date:				
(*							
Secondary Signature:			Data				
(If necessary)			Date:				
You, the payor, may revoke your authorization at any time in writing subject to providing PESI at least 30 business days notice before the next debit is scheduled. To							
obtain a cancellation form, contact PESI, your Financial Institution or visit www.cdnpay.ca. For more information on your right to cancel, contact your financial							
institution or visit www.cdnpay.ca. PESI may assign your authorization, whether directly or indirectly, by operation of law, change of control or otherwise, and shall provide written notice to you following such assignment.							
EMAIL SUBSCRIPTION (OPTIONAL)							
Keep informed! By checking the box provided below, you consent to PESI informing you about savings							
programs, services, offerings and incentives at the email address provided above. You can withdraw							
your consent at any time.							
PowerStream Energy Services offers a customer portal and electronic billing. Find out more with the details							
of your first bill.							
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This form can be completed and submitted online.							
Visit: https://ps-suite.myutility.net/portal/prod/Forms/Form_Landing for a fast and							
convenient web form.							

If you prefer to use this printed form, send the completed form to:

Email: customercare@powerstreamenergy.com or

Fax: 905-952-5290 or

Mail: P.O. Box 95600 RPO Newmarket CTR, Newmarket, ON L3Y 8J8

MOVING OUT NOTIFICATION FORM

PowerStream Energy Services

Provided by Alectra Energy Services Inc.

A resident planning to leave their unit should use this form to notify PowerStream Energy Services at least two weeks before moving out.

We will send your final bill to an address of your choice. It will include applicable utilities consumed before your move-out date.

Circle to indicate whethe	r you are the:	Owner	or	Tenant		
Resident's Name: (account holder)			,	Account Number:		
Current Address: (service location)	Unit #	at:	'			
Forwarding Address: (for final bill)						
	C Home (old):			(Work:		
Contact Information	C Home (new):			C Cell:		
	Email:					
Move-Out Date:					(YYYY-MM-DD)	

PRIVACY: In accordance with the Personal Information Protection and Electronic Documents Act (PIPEDA), the Resident named above acknowledges that providing personal information to PowerStream Energy Services Inc. is considered consent to the collection, use and disclosure for billing, collection, auditing, and other necessary purposes. The information will only be shared with related PowerStream Energy Services Inc. companies and third-party service providers, and is processed and stored with appropriate confidentiality levels as per PowerStream Energy Services Inc.'s Privacy Policy. Our billing practices comply with applicable Ontario Energy Board Codes and Rules, associated policies, standards and procedures.

AUTHORIZATION: I understand that my security deposit, if applicable, will be applied to my account on final billing. Should the final billing amount be less than the amount of the security deposit, PowerStream Energy Services will mail a cheque for the balance to the forwarding address provided above.

I confirm that the information I have provided above is true and complete.

	Send completed forms to:			
			Email:	customercare@powerstreamenergy.com or
			Fax:	1-905-952-5290 or
Paridant/a Cianatuma	Date	(YYYY-MM-DD)	Mail:	P.O. Box 95600 RPO Newmarket CTR,
Resident's Signature				Newmarket, ON L3Y 8J8