GREAT PLAINS
NATURAL GAS CO.
A Division of Montana-Dakota Utilities Co.
In the Community to Serve®

CONSENT TO DISCLOSE UTILITY ENERGY USAGE INFORMATION

All information requested on this form must be provided for the consent to be valid. If you have questions or require assistance, please contact Great Plains Natural Gas Co. (Great Plains). This form may be available from your utility provider in other languages. To obtain a copy in another language, please contact your utility provider.

Great Plains Natural Gas Co. Attn: Customer Support

Mailing Address: PO Box 7608, Boise, ID 83707-1608

Phone: 1-877-267-4764 **Email:** customerservice@gpng.com **Fax:** 701-323-3104

For additional information, including the utility's privacy policy, visit ***www.gpng.com***

TO BE COMPLETED BY THE CUSTOMER

By signing this form, you authorize Great Plains to release the customer energy usage information to:

Organization/Trade Name: _____

Contact Person (if available): _____

Physical and Mailing Address: _____

_____

Phone: _____ Email: _____ Fax: _____

This organization will receive the following information:

- ☐ The following energy usage information.
  - The date your natural gas meter was read by Great Plains Natural Gas Co.
  - The number of days in the billing period.
  - The monthly gas energy usage in dekatherms for the specified period. *

  Your consent to make available information from the previous _____ months.

  *If you have resided at the address less than the amount of time designated above, energy usage will only be provided for the time that you have been the accountholder or a maximum of 36 months.
- ☐ Information regarding your participation in energy efficiency or other Great Plains programs.

This information will be used to (*check all boxes that apply*):

- ☐ Provide you with products or services you requested
- ☐ Offer you products or services that may be of interest to you
- ☐ Determine your eligibility for an energy program
- ☐ Analyze your energy usage
- ☐ Other (specify) _____

ENERGY USAGE INFORMATION COLLECTION PERIOD

This consent is valid for a one-time disclosure of energy usage information relating to a single utility account. Great Plains will require an original, separate consent form for disclosure of usage information for each utility account.

CUSTOMER DISCLOSURES

***Customer usage information can provide insight into activities within the premises receiving utility service. Great Plains may not disclose your customer information except

1. if you authorize the disclosure
2. to contracted agents that perform services on behalf of the utility, or
3. as otherwise permitted or required by laws or regulations. ***

*****You are not required to authorize the disclosure of your information, and your decision not to authorize the disclosure will not affect your utility services. *****

***You may access your standard customer energy usage information from Great Plains without any additional charge. ***

***Note that Great Plains will have no control over the information disclosed pursuant to this consent, and will not be responsible for monitoring or taking any steps to ensure that the recipient maintains the confidentiality of the information or uses the information as authorized by you. Please be advised that you may not be able to control the use or misuse of your information once it has been released. ***

***In addition to the energy usage information described above, the records received by the organization may include other information such as your name; account number; meter number; utility type; service address; premise number; premise description; meter read date(s); number of days in the billing period; utility invoice date or base rate bill amount. Great Plains will not provide any other information, including Personally Identifiable Information such as your Social Security Number or any financial account number to the organization through this consent form. ***

PLEASE READ THE CUSTOMER DISCLOSURES ABOVE BEFORE SIGNING THIS FORM

By signing this form, you acknowledge and agree that you are the customer of record for this account and that you authorize Great Plains to disclose your energy usage information as specified in this form.

_____

APPLICABLE CUSTOMER ACCOUNT NUMBER

_____

SERVICE ADDRESS

_____

PRINTED NAME

_____ _____

SIGNATURE OF CUSTOMER OF RECORD DATE SIGNED