



Optional Rate Authorization

Fax signed form to:
858-654-8393

OR

Mail: SDG&E
Rate Support
8306 Century Park, CP42I
San Diego CA 92123

Email: RS-RateSupport@semprautilities.com

Customer Name: _____

Account Number: _____

Address: _____

Request for Optional Rate Service:

Applicant hereby requests that San Diego Gas & Electric (SDG&E) change the above account(s) from rate schedule _____ to rate schedule _____, as of the next meter reading date.

Agreement by Applicant:

Applicant certifies that this account(s) is eligible for and meets all the applicability and special conditions associated with the rate that is requested.

Applicant understands that the terms and conditions of Rule 12 require a 12-month minimum term of service on an optional rate. Furthermore, applicant understands that any change in their operation and/or difference in local weather conditions can alter the projected benefits of one optional rate compared to other rates.

On Behalf of Applicant:

Signature: _____

Type/Print Name: _____

Title: _____

Date of Signature: _____ Phone No. _____