

Central Maine Power Company Request for Consolidated Billing Services

Supplier Name: _____ Dun's + 4: _____ + _____

Bank Information for transferring payments:

Bank name: _____

Bank phone: _____

Routing & transit number (ABA): _____

Bank account number: _____

Federal tax id: _____

Provide the following data exactly as it is to appear on the customer's bill

Company Name: _____	Field Size Limits: 30 characters
Acronym: _____	5 characters
Account Number Format: _____ (eg: zzz-99999)	15 characters
Customer Service Business Hours/Days: _____	30 characters
Customer Service Phone Number: (____) ____ - _____	

Additional Requirements

Company Logo: Available space is 5/8" high x 1 1/4" wide. Image is printed in black & white. E-mail appropriately sized b/w image in .TIF file format, scanned at 240 PEL. **or** attach appropriately sized b/w image hard copy.

T&D Budget Plan: Allow customers to participate in Budget Payment Plan? **Yes / No**

Rates: Rates may be submitted electronically or attached hard-copy.
Rate codes can be up to 5 characters, alpha-numeric.
Rate names can be up to 24 characters, alpha-numeric.

Pro-rate rate code price changes? **Yes / No**

Pro-rate seasonal price changes? **Yes / No**

Standard structure rates will be implemented, and price quotes will be provided for non-standard rate structures, within 20 business days of receiving this complete request.

Submit to: Susan Roberts, Supplier Services Coordinator
Central Maine Power Company
83 Edison Drive
Augusta, Me 04336
susan.roberts@cmpco.com

Requested by: _____

Title: _____

Date: _____