

## DOMINION ENERGY VIRGINIA AGGREGATOR REGISTRATION FORM

The Aggregator Registration Form is specifically for aggregators, as defined by 20 VAC 5-312-10 of the Virginia State Corporation Commission's Rules Governing Retail Access. If the Aggregator offers services beyond the normal aggregation service, then the Aggregator and Company will need to terminate the Aggregator Agreement and complete the Competitive Service Provider application package.

Aggregator access to the Company's Mass List, requires the applicant to execute an Aggregator Agreement, complete the Aggregator Registration Form, and Security Administrator Form. The applicant shall mail the completed documents to:

Electric Supplier Relations  
Dominion Energy Virginia  
P. O. Box 26666  
Richmond, VA 23261-6666

To expedite the registration process, the applicant may also fax a copy of the Registration Form to Electric Supplier Relations at (804) 819-2746.

Please furnish the following information:

<b>1. Basic Information</b>	
Application Date	
Aggregator Name (Legal Name)	
Aggregator Name (Trade Name if different than Legal Name)	
Mail Address	
Mail City	
Mail State	
Zip Code	
Toll Free Number (Customer Service)	
E-Mail Address	
Aggregator Billing Address	
Bill Address	
Bill City	
Bill State	
Zip Code	
Aggregator Doing Business As	
Aggregator DUNS Number	
Customer Class or Classes of proposed service (Check all that apply.)	<input type="checkbox"/> Residential <input type="checkbox"/> Place of Worship <input type="checkbox"/> Commercial <input type="checkbox"/> Industrial
Anticipated Number of Customers	

<b>2. Customer Service</b>	
Customer Service Supervisor (Name)	
Direct Dial Voice Telephone Number	
Pager Number	
Fax Number	
E-Mail Address	

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**3. Certification, Authorization, and Signature**

Dominion Energy Virginia will treat all information provided pursuant to the Aggregator's registration in a confidential manner. The Company, however, may be required to disclose some or all of such information to the Virginia State Corporation Commission or pursuant to a court order.

Applicant will notify Dominion Energy Virginia, Electric Supplier Relations if any information changes.

Applicant certifies that the information herein is complete and accurate to the best of the Applicant's knowledge, information and belief, and that the individual signing below is an authorized representative of the Aggregator.

Applicant hereby authorizes Dominion Energy Virginia to obtain any information that may be required relative to the Applicant from any source, including Applicant's financial and trade references. Applicant also hereby authorizes each source to provide such information.

Legal Name of Applicant	
Signature of Authorized Representative	
Name (Please Print)	
Title	
Date	

Contact information of the individual signing this form:

Mailing Address: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Telephone: \_\_\_\_\_

E-Mail: \_\_\_\_\_