

Flex Peak Opt-Out Request Form

I, _____, request to opt-out the below facility(s) for:

A portion of the Flex Peak Season, beginning on _____ and returning to the program on _____.

The remainder of the Flex Peak season, beginning on _____.

Due to unforeseen circumstances or situations at my facility, _____, is unable to participate in the Flex Peak Program.

Opt-Out Option

List the facility site(s) and Meter number(s) you wish to opt-out below.

FACILITY SITE LOCATION / ADDRESS	METER #

I understand that by opting-out I will not receive payment for the days my facility is not participating in the program, even if an event is called. I also understand that if an event is called, I'm not expected to provide any load reduction during that week.

If I selected a temporary opt-out period, I understand my facility will automatically be re-instated in the program on the date I've indicated unless an additional opt-out request is submitted.

CUSTOMER NAME (PLEASE PRINT)

CUSTOMER SIGNATURE

DATE

By typing your name on the line above, you are electronically signing the application, subject to the 'Customer Agreement' above.

Please send completed form to FlexPeak@IdahoPower.com