# Business Demand Response

## Letter of Authorization

This document serves as a formal authorization for the Evergy Business Demand Response Program.

### **Evergy Business Customer Information**

Email:

#### **Customer Authorization for Designated Market Partner**

Please indicate which of the following specific intentions apply to the Customer's engagement with the Program:

Market Partner is authorized to receive customer billing and/or interval usage data.
Market Partner is authorized to be included in Program communications, which may include Customer contact and account information.

Market Partner is authorized to be the designated payee for Program incentive payments.

Market Partner is authorized to manage all elements of Program participation on behalf of the Customer, including usage data access, communications, payment, and execution of the Participation Agreement.

### Authorization

I hereby authorize the personnel of the designated Market Partner to act as our representative in the above, indicated matters pertaining to our participation or prospective participation in the Evergy Business Demand Response Program. This authorization expires on \_\_\_\_\_\_ (optional), or may be terminated at any time upon notification from me (Customer) or my Market Partner to BDR@Evergy.com; such termination shall take effect within 10 business days of Evergy's receipt of such written notification of termination of this authorization.

By signing below, I acknowledge that I am an authorized representative of the Customer organization. I have read and understand the terms and conditions stated in the Evergy Demand Response Program Participation Agreement.

Customer Signature:	Date:
Customer Contact Name & Job Title:	
Phone:	
Email:	

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