

SHARED CLEAN ENERGY FACILITY (SCEF) PROGRAM

ATTACHMENT C

UPDATE IN ACCORDANCE WITH ARTICLE 16. NOTICES AND CONTACT INFORMATION – FOR ASSIGNMENTS AND CHANGE OF CONTROL PURSUANT TO SECTION 13.1 OR 13.3

In accordance with Section 16.4 of the *Tariff Terms Agreement for the Purchase and Sale of Energy and Connecticut Class I Renewable Energy Credits from SCEF Projects Tariff Attachment 1: Tariff Terms Agreement* number _____ between The Connecticut Light and Power
Project # (Ex: SCEF1-####)
Company dba Eversource Energy and _____ for the Facility known as
Subscriber Organization
_____ with an Effective Date of ____/____/____ (“SCEF
Project Name Effective Date of Tariff Terms Agreement
Tariff Terms Agreement”) the notice and contact information specified in the SCEF Tariff Terms Agreement (“SCEF Agreement”) is hereby changed as follows without amendment of the SCEF Agreement.

	SUBSCRIBER ORGANIZATION
<i>Party Name</i>	
<i>Address</i>	
<i>Business Website</i>	
<i>Tax ID Numbers</i>	<input type="checkbox"/> US Federal: _____ <input type="checkbox"/> Other: _____
<i>DUNS Number</i>	
<i>Jurisdiction of Organization</i>	
<i>Company Type</i>	<input type="checkbox"/> Corporation <input type="checkbox"/> Limited Partnership <input type="checkbox"/> LLP <input type="checkbox"/> LLC <input type="checkbox"/> Partnership <input type="checkbox"/> Other:

CONTACT INFORMATION	
	SUBSCRIBER ORGANIZATION
<i>General</i> (day to day/ administrative)	ADDRESS: _____ ATTN: _____ TEL#: _____ FAX#: _____ _____ EMAIL: _____
<i>Contract</i>	ADDRESS: _____ ATTN: _____ TEL#: _____ FAX#: _____ _____ EMAIL: _____
<i>Legal Notices</i>	ADDRESS: _____ ATTN: _____
<i>Security</i>	ADDRESS: _____ ATTN: _____ TEL#: _____ FAX#: _____ _____ EMAIL: _____

ACCOUNTING INFORMATION	
· Invoices · Payments · Settlements	ADDRESS: _____ ATTN: _____ TEL#: _____ FAX#: _____ _____ EMAIL: _____
<i>Transfer Numbers (IF APPLICABLE)</i>	BANK: _____ BANK ADDRESS: _____ _____ ABA: _____ ACCT: _____ <input type="checkbox"/> CHECKING <input type="checkbox"/> SAVINGS OTHER DETAILS: _____
<i>Checks (IF APPLICABLE)</i>	ATTN: _____ ADDRESS: _____ _____
<i>ACH Numbers (IF APPLICABLE)</i>	BANK: _____ BANK ADDRESS: _____ _____ ABA: _____ ACCT: _____ <input type="checkbox"/> CHECKING <input type="checkbox"/> SAVINGS OTHER DETAILS: _____

Primary Payment Method:	ACH Numbers	Checks		
Secondary Payment Method:	ACH Numbers	Wire Transfer Numbers	Checks	N/A
Tertiary Payment Method:	ACH Numbers	Wire Transfer Numbers	Checks	N/A

We strongly recommend you use an electronic funds transfer (ACH) as your primary payment method. Electronic funds transfers are a faster, more secure method of payment than check delivery.