LOAD PROFILER PROGRAM APPLICATION

Company Name: _______________________________________________________________

Address: _____________________________________________________________________

Contact Person: ___________________________ Title: ______________________________

Email: ___________________________________  Acct. Number: _____________________

Phone: ___________________________________  Fax: _____________________________

Identify the meter(s) that will be connected to the Load Profile Data Software:

Meter 1:__________________________________ Elec Gas Wtr Other _________
(circle)

Meter 2:__________________________________ Elec Gas Wtr Other _________
(circle)

Meter 3:__________________________________ Elec Gas Wtr Other _________
(circle)

Meter 4:__________________________________ Elec Gas Wtr Other _________
(circle)

Meter 5:__________________________________ Elec Gas Wtr Other _________
(circle)

Meter 6:__________________________________ Elec Gas Wtr Other _________
(circle)

Terms and Conditions:
Customer acknowledges that a one-time setup fee of $110 for each meter in the program will be paid by the utility on the customer’s behalf, and that a monthly fee of $32.99 for each meter in the program will be applied to the customer’s monthly utility bill. Unless special circumstances warrant, each meter will remain in the program for 12 months. Customer must notify OPU of its intent to cancel the service 90 days before the termination date. Customer will provide, at its expense, a modem, ethernet or a web based connection for the meter(s) and if necessary any data transfer device(s). Customer will directly cover any cost for the devices and associated service fees.

I HAVE READ, UNDERSTAND AND AGREE TO ALL OF THE TERMS AND CONDITIONS OF THE LOAD PROFILE PROGRAM. PLEASE ENROLL METERS LISTED ABOVE INTO THE PROGRAM.

NAME: ___________________________________ TITLE: _________________________

SIGNATURE: ________________________________ DATE: ______________________

Owatonna Public Utilities, 208 S Walnut Ave, Owatonna MN 55060
FACILITY CONTACT PERSON: ______________________________________
EMAIL: ____________________________ PHONE: ______________________
CELL: _____________________________ PAGER: ______________________

Note: This person will be the contact for issues that may arise with meter data downloads or web page access issues.

<table>
<thead>
<tr>
<th>UTILITY USE ONLY</th>
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<tbody>
<tr>
<td>RECEIVED: _______</td>
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<tr>
<td>DATE PROGRAM STARTS: _______</td>
</tr>
<tr>
<td>COMMENTS: ___________________________________________</td>
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<tr>
<td>COPIES TO: ___________________________________________</td>
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