

# SUBJECT: SCE'S FORM - CONFIRMATION OF AUTHORIZED AGENT TO ACT ON BEHALF OF APPLICANT FOR DISTRIBUTION AND JOINT RELOCATION PROJECTS

By executing the following form, "Confirmation of Authorized Agent to Act on Behalf of Applicant for Distribution and Joint<sup>1</sup> Relocation Projects" (the "Form"), the Applicant<sup>2</sup> of Southern California Edison ("SCE") confirms the authorization of a designated third-party authorized agent ("Authorized Agent")<sup>3</sup> to act on the Applicant's behalf to acquire work order project information from SCE or to execute new SCE forms and other SCE documents as designated in the Form. The Form is designed to simplify the authorization process and protect the privacy rights of the Applicant.

#### **APPLICANT/AUTHORIZED AGENT INFORMATION**

- The Form shall be completed and signed by a representative in the Applicant's organization who has the authority to legally bind the Applicant (*e.g.*, an executive officer of a corporation, the City Manager of a municipality, etc.).
- The Form shall be completed and signed by a representative in the Authorized Agent's organization who has the authority to legally bind the organization (*e.g.*, an executive officer of a corporation).
- List all the acts and functions (page 2) for all project(s) designated (page 5) for which the Authorized Agent is authorized to act upon on behalf of the Applicant. This authorization is in effect until the date indicated (page 3) or for the duration of the project(s) identified, whichever is earlier.
- The Applicant must immediately notify SCE in writing of any modification of the Authorized Agent's authority by submitting a new Form. In the event that multiple Forms are on file, the most recently executed Form will supersede any and all previously signed Forms.
- Fully executed original Forms shall be provided to the SCE Planner, Project Manager, or Distribution Construction Contract Management. The Applicant may photocopy the Form for the Applicant's records.

Thank you,

SOUTHERN CALIFORNIA EDISON

1 Issue date: March 2012 Rev. 03/29/24 DS-191

<sup>&</sup>lt;sup>1</sup> Include Transmission and Distribution or Communication.

<sup>&</sup>lt;sup>2</sup> An Applicant is the owner or developer requesting SCE to deliver/supply electric service.

<sup>&</sup>lt;sup>3</sup> An authorized Agent is a person(s) or an agency.

# CONFIRMATION OF AUTHORIZED AGENT TO ACT ON BEHALF OF APPLICANT FOR DISTRIBUTION AND JOINT RELOCATION PROJECTS

#### THIS IS A LEGALLY BINDING CONTRACT – READ IT CAREFULLY

(Please Print or Type)

I,				,
	APPLICANT'S REPRESE	NTAT	IVE NAME AND TITLE	
of				
	APP	LICA	NT	
have	the following mailing address:			
APPL	ICANT'S MAILING ADDRESS		CITY STATE ZIP	
do he	ereby appoint			
	AUTHORIZED AGENT'S NAME AND T	TTLE	(if multiple agents add names on page 6)	
of _				
	AUTHORIZED AGENT	'S CO	MPANY (if applicable)	
locat	ed at the following mailing address:			
AUTH	ORIZED AGENT'S MAILING ADDRESS		CITY STATE ZIP	
to ac	t as Applicant's Authorized Agent for the	_proj	ect(s) as listed on the attachedsheet(s).	
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	plicant, also hereby confirm that the above Authollowing acts and functions (initial all applicable		•	rtorm
	one wing uses and runerious (initial an approvate	, 45 5	permed serow.	
	* Request Facility Relocation (if applicable)		Sign Indemnity Letter	
	* Obtain Project Invoice(s)		Sign Preliminary Design and Engineering Agreement, Form 14-238	
	* Receive final electrical design & contracts for approval and signatures by the Applicant		Sign Added Facilities Agreements, Forms 16-308 and 16-309	9
	* Represent applicant at all project meetings		Sign Rule 20 Contract (Form CSD-156-1, 2, 3, or 4)	
			Obtain Distribution Project Accounting Information from Distribution Construction Contract Management	
	ly items above/in this section/with an asterisk* are checked, a ry is not required to execute this document		Sign Contract for Extension of Electric Distribution Line, Rule No. 15, (Installation by SCE) Form 16-330	
			Sign and approve preliminary and final project design	
	Sign and apply for Temporary Service		Sign Contract for Extension of Electric Distribution Line, Rule No. 15, Installation by Applicant, Form 16-331	
	Sign Assignment of contract for Extension of Lines or Installation of Electric Facilities, Form C-200		Sign Rule 15 Refundable or Discount Option Estimate, Extension of Electric Distribution Line – Installation by Applicant or SCE – Appendix A	
	Sign Applicant Design Option Letter		Sign MOU or Letter Agreements	
	Sign Terms and Conditions Agreement for Installation of Line Extension by Applicant, Form 14-188		Sign Interconnection Facilities Financing and Ownership Agreement (IFFOA)	
	Sign Distribution Line Extension Competitive Bidding – Letter of Understanding, Form 14-189		Sign Project Cost Estimate Letter	
	2002. C. Charlemang, I om 17 107		Change address of where to send refunds, deficit bills, or reimbursable monies owed or due	
	$Sign\ Distribution\ Line\ and/or\ Service\ Extension-Applicant's$		Sign Customer Project Information Sheet (CPIS) Mixed-Fue Acknowledgment	1
2	Issue date: March	2012	Rev. 03/29/24	DS-19

am authorized to execute this document on behalf of the Appli Authorized Agent has authority to act on the Applicant's behal the specific acts and functions as indicated on this Form.	
I, Applicant, hereby release, hold harmless, and indemnify SC action, damages, or expenses resulting from unauthorized use understand SCE reserves the right to verify any authorization. This authorization is in effect until	e of this information by the Authorized Agent. I request submitted before releasing information. If for the duration of the project(s), whichever is it any time by submitting a written request. I
I, Applicant, understand that I am not fully releasing my rights or to communicate with representatives of SCE regarding my (1) choose to request that all information (contracts, billing, et and that I only be contacted should a problem occur that req receive all information (contracts, billing, etc.) and communic to my Authorized Agent. I have chosen to do one of the following option selections below:	project(s) under this Agreement. As such I may c.) be handled directly by my Authorized Agent uires my immediate attention; or (2) request to cation in addition to that information being sent
Option 1:Option 2:(Documentation from Distribution Construction excluded)	ion Contract Management and Non-Energy Billing are
I understand that the Authorized Agent may bind the appli	cant for those items checked/indicated above.
Applicant's Representative Signature	Telephone Number
Print Name and Title:	
Date:	
I, Authorized Agent's Representative, have the authority Authorized Agent, hereby release, hold harmless, and inden causes of action, damages, or expenses resulting from unauthor pursuant to this authorization and from the taking of any actio	nnify SCE from any liability, claims, demand, rized use of the Applicant's information obtained
Authorized Agent's Representative Signature	Telephone Number
Print Name and Title:	
Date:	

I, Applicant's Representative, declare under penalty of perjury under the laws of the State of California that I

## ACKNOWLEDGMENT

A notary public or other officer completing this certificate verifies only the identity of the individual who signed the document to which this certificate is attached, and not the truthfulness, accuracy, or validity of that document.

State of California		
County of	)	
On	before me,	
		(insert name and title of the officer)
personally appeared		, who proved to me on the basis of
me that he/she/they execu	uted the same in his/her/thei	ne(s) is/are subscribed to the within instrument and acknowledged to ir authorized capacity(ies), and that by his/her/their signature(s) on the f which the person(s) acted, executed the instrument.
I certify under PENALT and correct.	Y OF PERJURY under the	laws of the State of California that the foregoing paragraph is true
WITNESS my hand and	official seal.	
Signature		(Seal)

#### PROJECTS INCLUDED IN THIS AUTHORIZATION:

	SCE PRODUCT/PROJECT#4	TRACT # (S) AND PHASE(S)	LOCATION	CITY
	SCE PRODUCT/PROJECT#	TRACT # (S) AND PHASE(S)	LOCATION	CITY
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<u>.                                    </u>	SCE PRODUCT/PROJECT #	TRACT # (S) AND PHASE(S)	LOCATION	CITY
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Where available, as the Product/Joint Relocation Project number may not have been assigned at this point
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### ADDITIONAL AUTHORIZED AGENT NAMES

AUTHORIZED AGENT'S NAME	TITLE
AUTHORIZED AGENT'S NAME	TITLE
icant's InitialsDate	

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