Residential Customer Transfer Form

| Name | | |
|---|--|-------------------------|
| Home Phone | Work Phone | |
| Mobile Phone | Email | |
| | | |
| Service Address | | |
| Ambit Energy Account Number | | |
| Address | Apartment/unit number | |
| City | State Zip | |
| Consultant Name | Consultant ID | |
| Customer Authorization | | |
| I authorize Ambit Energy to change the assignish will in no way affect the price I pay for service. | gnment of my account to the Consultant listed above. I undersce, my terms and conditions, nor the benefits I am eligible to reade no additional promises or guarantees related to the reassign | receive. Furthermore, I |
| Customer Signature | Date | |
| Consultant Signature | Date | |
| Once this form is complete, please | e fax it to Consultant Support for processing at to process. NOTE: Commercial customers cannot be transferre | |

