## RE: 2013 Vendor Agreement

Enclosed you will find a 2013 Vendor Agreement for the Bill Payment Assistance Program with Green Mountain Energy Company ("GMEC"). If your agency would like to participate in bill assistance program with GMEC, please return the completed and signed agreement to the following contact below at GMEC for this program by mail or fax to:

Green Mountain Energy Company Attn: John Bui P.O. Box 689008 Austin, TX 78768 (512) 691-6151 Fax

If you have any questions regarding pledge payments, GMEC customer information, or billing data in relation to this program, please contact:

Green Mountain Energy Company (866) 785-4668 [option 4] (phone) (254) 518-1206 (fax) ceap@greenmountain.com (email address)

Pledges with Green Mountain Energy Company's customer's accounts should be sent to the following accounts payable address:

Green Mountain Energy Company PO Box 660305 Dallas, TX 75266-0305

This contact information on the Vendor Agreement is not intended for distribution to individual clients or customers and should only be used for communications with your agency and Green Mountain Energy Company.

If you have any questions regarding the above, you may also feel free to contact me at (512) 691-6339.

Sincerely,

John Bui Senior Regulatory Analyst Green Mountain Energy Company

## VENDOR AGREEMENT BILL PAYMENT ASSISTANCE PROGRAM

Vendor:	Green Mountain Energy Company 300 West 6 <sup>th</sup> Street Suite 900 Austin, TX 78701 Phone: 1-866-785-4668 Fax: 254-518-1206 Email: support@greenmountain.com
Agency:	Fort Bend County
	Agency Contact:
	Phone:
	Fax:
	Email:

The Agency named above provides billing assistance service for families and individuals. The Vendor named above is a certified retail electric provider that is authorized to receive payments from Agency. A Beneficiary is a customer of Vendor receiving bill payment assistance from the Agency.

Vendor will, with reference to a Beneficiary:

- Accept pledges of payment by the Agency as payment on behalf of a Beneficiary and allow the Agency 20 days to pay Vendor. Vendor agrees to continue to provide services to the Beneficiary during this period;
- Upon receipt of written authorization in the form attached hereto, signed by the Beneficiary, provide Agency, at no cost, the Beneficiary's previous twelve (12) month billing history by the end of the next business day;
- Transmit billing history via electronic mail or facsimile; and
- Not discriminate against Beneficiary in price or services as a result of their receiving bill payment assistance from Agency, including the availability of deferred payment plans, level or average payment plans, discount, budget, advance payment, or other credit plans. Provided, however, that some of these programs require customers, including Beneficiary, either on their own behalf or as a result of payments by Agency, to be current in their account.

## Agency will:

- Make timely payment to Vendor in accordance with its pledges.
- Obtain Beneficiary's written authorization to provide information about Beneficiary's account with Vendor to Agency, and provide Vendor with a copy of such documentation. Beneficiary's account becomes delinquent either as a result of non-payment or Agency's failure to pay Vendor any pledged amount, Vendor may, notwithstanding anything in this agreement to the contrary and without notice to Agency, terminate service to the Beneficiary in accordance with rules established by the Texas Public Utility Commission and begin collection activity.
- Notify Vendor if a pledge amount has changed or if they no longer intend on making a pledge on a beneficiary's account.
- Will provide a point of contact for the Vendor to verify large pledge amounts and to inquire about missing payments.

Either party to this Vendor Agreement may terminate the Vendor Agreement upon notification to the other party. No advance notice of termination shall be required.

This Vendor Agreement shall be effective from January 1, 2013 through December 31, 2013 unless terminated by either party by letter of notification.

AGENCY	VENDOR
Authorized Signature	Authorized Signature
Robert E. Hebert	John Bui
Printed Name of Signatory	Printed Name of Signatory
County Judge	Senior Regulatory Analyst
Title of Authorized Signatory	Title of Authorized Signatory
	512-691-6339
Telephone Number	Telephone Number
	512-691-6151
Fax Number	Fax Number
2-26-2013	
Date Signed	Date Signed
Email Address	Approved As To Legal Form:
	Approved As To Legal Form:
	Asst.County Atty. Date