

**THE CONNECTICUT LIGHT AND POWER
WINTER PROTECTION PROGRAM SIGN-UP FORM**

To sign up for the Winter Protection Program please print off this form, fill it out and return it to us at the address or fax number below.

Yes, I believe I qualify for the Winter Protection Plan and ask that you code your records so that my CL&P electric service will not be shut off this winter.

Customer Name

Street

City/Town

State

Zip

Telephone Number

Electric Account Number

Customer Signature

Date

Important Note: You must have an agency representative sign below to receive winter protection services.

Signature of Agency Representative

Street Address

P. O. Box

City/Town

Agency Phone Number

After completing this form, please mail or fax to us at:

Connecticut Light & Power Company
Credit Administration
P.O. Box 270
Hartford, CT 06141-0270

Fax Number: 1-800-296-0031