

GoSolarSF Program Protected Customer Data Sharing Authorization Form

Revised: November 2024

This required Authorization Form allows the San Francisco Public Utilities Commission (SFPUC) to share your Protected Customer Data with relevant parties listed below in order to facilitating your participation in the GoSolarSF program. Protected Customer Data includes an individual's full name, mailing address, contact information such as a phone number and email address, CleanPowerSF enrollment status, PG&E electric account number, CARE/FERA discount rate status, and any submitted program documents and communication necessary to manage program participation in the GoSolarSF program. (For more information about how SFPUC and CleanPowerSF protect your information, see our Privacy Policy at <https://www.cleanpowersf.org/privacy>.)

Applicant Information

Must be the same customer's name and GoSolarSF system number as listed on your application.

Applicant Name: _____

CleanPowerSF, and City access to Protected Customer Data

I authorize employees of the SFPUC, which also includes CleanPowerSF employees, and other City and County of San Francisco employees, agents, and representatives, to access all account data and information that I submit and receive in order to manage and process my GoSolarSF program application, participation, and rebate payment.

Installer Authorization

To facilitate my participation in the GoSolarSF program, I, the electric account holder, hereby authorize SFPUC to share my Customer Data with my selected GoSolarSF Program Participating Installer:

Installer company name: _____

OPTIONAL: Other People Authorized to Receive Customer Data

I also authorize the following people (other than the Installer) to help with my application and/or my participation in the GoSolarSF program. The person or people listed can communicate on my behalf regarding my participation in the program, but do not have the authority to sign program forms on my behalf:

Name: _____, Relationship: _____, Phone: _____ Email _____

Name: _____, Relationship: _____, Phone: _____ Email _____

Acknowledgement

By signing this authorization, I agree to the sharing of my Protected Customer Data by SFPUC with the above listed parties for the purposes of the GoSolarSF program.

Applicant Signature: _____

Please return the completed form by e-mailing it to GoSolarSF@sfwater.org, or by mailing it to:

SFPUC, GoSolarSF, Attn: Rosie Scott
525 Golden Gate Ave, 7th floor
SF, CA 94102

If you have any questions about this form, or the program, call us at 415-554-3434, or email us at GoSolarSF@sfwater.org. Visit our GoSolarSF webpage at <https://sfpuc.org/accounts-services/sign-up-for-savings/gosolarsf>

