



Notification Preference Form

Please complete the fields below, and select your preferred communication method to receive notifications about your Constellation account.

You can change your preference at any time. Please note all Connecticut customers will automatically receive account-related notifications via U.S. Mail.

Customer Name (Please Print):		
Address:		
City:	State:	Zip:
Account Number from your bill:		
☐ Eversource Customers, please list your account no	umber (11 digits): _51	
☐ UI Customers, please list your POD ID# (13 digi	its):	
In addition to notifications sent via U.S. Mail, please s	send account-related communicatio	ns to me via:
☐ Email		
☐ Third Party Notification		
Name of Third Party to be Notified (Please Prin	t):	
If you opt to have a Third Party receive notification Party Notification Form found here: https://www.Residential/CT_Third_Party_Notification.pdf.		
Customer Signature:		Date:

Mailing Address:

Constellation Customer Care PO Box 4911 Houston, TX 77210-4911 Email: home@constellation.com

Fax Number: 906-315-1060

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