AUTHORIZED AGENT DECLARATION FORM [CCPA]

This is to certify that I grant permission to _____ to act as my authorized agent, to make requests on my behalf related to my personal information, and I authorize him/her to receive my personal information and any other information from Just Energy and its affiliates* pursuant to my rights under the California Consumer Privacy Act (CCPA) as of the date below and thereafter.

AUTHORIZATION GRANTED BY:

_____
Signature

_____
Print Name

_____
Date

NOTARIZATION:

This document was signed and sworn before me on _____ by

_____.

_____
Signature of Notary Public

* Just Energy's affiliates include Just Energy Solutions Inc.; Filter Group USA Inc.; and Interactive Energy Group LLC.