



Thank you for your interest in establishing a Master Summary account. To be eligible for a Master Summary account:

- You must have five or more (residential or non-residential) active accounts.
- Your accounts must be in Excellent Credit standing.
- Any bills with disputed charges must be paid in full and on time. Necessary adjustments will be reflected on the following month's bill.
- All accounts should reflect a \$0 balance prior to being added to Master Summary Billing.
- Summary Billing customers are required to pay in full and on time in order to retain this service. We offer Automatically Monthly Payments as one of our payment options.
  - o NV Energy reserves the right to cancel participation in the service at any time.

If you meet the eligibility requirements and would like to sign up for a Master Summary account, please read, complete and sign the following agreement and return it to the address below. **Please also supply a list of your NV Energy 19-digit account numbers.**

Mail to:  
NV Energy  
Attn: Summary Billing Support  
6226 W. Sahara Ave, MS#18  
Las Vegas, NV 89146

You can also fax to (702) 402-5547 or email to [SummaryBillingSupport@nvenergy.com](mailto:SummaryBillingSupport@nvenergy.com).

Company Name: \_\_\_\_\_

Division/Dept: \_\_\_\_\_

Mailing Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Primary Contact: \_\_\_\_\_

Phone Number: (\_\_\_\_) \_\_\_\_\_ Ext: \_\_\_\_\_

I (we) hereby authorize NV Energy to defer the billing on our accounts. I (we) understand that I (we) may not receive all bills within five (5) days of the meter readings, but will receive my (our) bills in a summarized format stating the total amount due for all the accounts. I (we) will continue to receive detailed information on every account. I (we) understand that one or more of my (our) accounts may need special handling each month and these accounts will be excluded from the Summary Billing. I (we) also understand any adjustments that may occur after the preparation of my Summary Bill will show on the subsequent billing. If I (we) fail to pay the total amount due or for any other reason, NV Energy reserves the right to cancel my (our) participation in the program at any time. I (we) understand participation in this program is voluntary. If at any time I (we) decide to terminate our enrollment in the Summary Billing Program, I (we) will notify NV Energy in writing.

Signature: \_\_\_\_\_ Date: \_\_\_\_\_