

Form of One-Time Instruction

(Date)

Billing Department
ISO New England Inc.
One Sullivan Road
Holyoke, MA 01040

RE: Instruction to pay Invoice per Section 3.1(c) of the ISO New England Billing Policy (the "Billing Policy")

Please accept this letter as an instruction (this "Instruction") for _____
(ISO issued Customer ID)
_____ (the "Customer") to pay the Customer's Invoice to
(Complete Company Name)
be issued by ISO New England Inc. (the "ISO") on _____ (the "Invoice"), to the extent
(Invoice issued date)
of available cash, from the cash deposit amount on hand with the ISO, as that amount may be replenished from time to time (the "Deposit"). In connection with this Instruction, the Customer acknowledges and agrees to the following:

- (a) This Instruction must be received by at least 5:00 p.m. (Eastern Time) on the day that is two Business Days prior to the Invoice Date.
- (b) The ISO may draw on the Deposit at any time to pay the Invoice. If there are insufficient funds in the Deposit, the ISO will draw down the full amount of the Deposit and may notify the Customer that there are insufficient funds available in the Deposit to pay the Invoice, but shall not be obligated to notify the Customer.
- (c) The Deposit will be held in the Customer's account established with BlacTd/2 (B)9 (Ia)6 (

invested or any liquidation of such Default Investment in connection with a draw on the Deposit will be deducted from the Deposit.

- (d) If the Deposit is held in the ISO's account with BlackRock, the Deposit shall at all times remain the property of the ISO, provided that the ISO shall only use the Deposit as set forth herein.
- (e) The C

sentence will not excuse a Payment Default under the Billing Policy or a Financial Assurance Default under the Financial Assurance Policy.

Nothing set forth in this Instruction modifies the rights and obligations of the ISO or the Customer under the Billing Policy, the Financial Assurance Policy, all other relevant documents and applicable law.

If this Instruction is acceptable to you, please sign a copy of this Instruction in the space indicated below and return it to the Customer.

Sincerely,

Authorized Signer

Complete Company Name

Address

Phone Number

Email Address

ACCEPTED AND AGREED:
ISO NEW ENGLAND INC.

ApprovedBy: _____

Name:

Title: