



**CITY OF MISSOURI CITY  
MUNICIPAL REGISTRATION FORM FOR  
RETAIL ELECTRIC PROVIDERS ("REP")**

**FILING INSTRUCTIONS**

Registration Form and Registration Fee should be submitted to:

**City of Missouri City**  
**Attn: Maria Jackson, City Secretary**  
**1522 Texas Parkway**  
**Missouri City, TX 77489**  
**Telephone: 281.403.8500**  
**Fax: 281.403.0683**  
**Email: maria.jackson@missouricitytx.gov**

A complete submission of the Registration Form consists of a properly completed form signed by an authorized representative and payment of Registration Fee of \$25.00, in accordance with PUC SUBST. R. § 25.113.

Legal Name of Retail Electric Provider  
(Must include all trade or commercial names)

PUC Certificate Number

Texas Business Address

Mailing Address

Principal Place of Business

Texas Regulatory Contact Information:

Name

Physical Address

Telephone Number

Fax Number

E-mail Address

Agent for Service of Process Contact Information  
(if different from above)

Name

Physical Address

Telephone Number

Fax Number

E-mail Address

Customer Service Toll-Free Number

If no toll-free number is available, provide the following:

Customer Service Contact Name

Title

Telephone Number

Types of Electricity Customer Classes Registrant  
Intends to Serve Within This Municipality

I am an authorized representative of the registering party, which is a **certificated retail electric provider**.

Signature of Authorized Representative

Name of Registering Party

Printed Name

Date