



Department of Public Service

ENERGY BROKER AND ENERGY CONSULTANT REGISTRATION FORM 23-01227

Pursuant to the Public Service Commission's Order Adopting Energy Broker and Energy Consultant Registration Requirements in Case 23-M-0106 and the Uniform Business Practices edits adopted in that order, Energy Brokers¹ and Consultants² are required to submit this form.

COMPLETE THIS FORM AND SUBMIT IN MATTER 23-01227 IN THE MATTER OF
REGISTRATION FOR ENERGY BROKERS AND CONSULTANTS

E-FILING INSTRUCTIONS CAN BE FOUND AT:

<https://dps.ny.gov/filing-documents-secretary>

1. BUSINESS INFORMATION

Business Name: Lower Watt LLC

Address: 18 Jule Court

City: Lakewood State: NJ Zip Code: 08701

Company Phone Number: 732-663-9288 Website Address: _____

Email Address: _____

¹ Energy broker is defined within the UBP as "a non-utility entity that performs energy management or procurement functions on behalf of customers or ESCOs, and (1) that assumes the contractual and legal responsibility for the sale of electric supply service, transmission or other services to end-use retail customers, but does not take title to any of the electricity sold, and does not make retail energy sales to customers, or (2) that assumes the contractual and legal obligation to provide for the sale of natural gas supply service, transportation or other services to end-use retail customers, but does not take title to any of the natural gas sold, and does not make retail energy sales to customers."

² Energy consultant is defined within the UBP as "any person, firm, association or corporation who acts as a broker in soliciting, negotiating or advising any electric or natural gas contract, or acts as an agent in accepting any electric or natural gas contract on behalf of an ESCO."

(BUSINESS INFORMATION CONTINUED)

If you intend to market your services under a DBA, provide a copy of your certificate of assumed name and list the name(s) here:

Type of Provider: Energy Broker Energy Consultant Both

Nature of business being conducted:

Type of customers: (check all that apply)

Residential Small Commercial Large Commercial/Industrial

Provide the contact information for any affiliates conducting energy-related business (including subsidiaries and parent corporations) within New York State or elsewhere:

Business Name: see attachment

Contact Name: _____

Address: _____

City: _____ State: _____ Zip Code: _____

Telephone: _____ Fax: _____

Email Address: _____

Provide the contact information for any parent company or other corporate entity with an ownership interest of 10 percent or more of the registrant:

Business Name: None

Contact Name: _____

Address: _____

City: _____ State: _____ Zip Code: _____

Telephone: _____ Fax: _____

Email Address: _____

During the previous 36 months, have any criminal or regulatory sanctions been imposed on the registrant, any senior officer of the registrant, any corporate entity with an ownership interest of 10 percent, or any energy affiliates listed above?

Yes No

(BUSINESS INFORMATION CONTINUED)

If yes, identify the entities or individuals subject to sanctions and provide a detailed explanation of the sanctions:

Disclose any decisions or pending escalated regulatory actions in other states that affect the registrant's ability to operate in that state, such as suspension, revocation, or limitation of operating authority:

None

List and describe any current formal investigations involving the registrant being conducted by law enforcement or regulatory entities:

none

List and explain any acquisitions, mergers, dissolutions, or bankruptcy involving the registrant that occurred in the previous 36 months:

None

List and describe any security breaches associated with customer proprietary information in the last 36 months that involved the registrant, including a thorough description of the actions taken in response to any such instances:

None

List all states in which the registrant has received authority to sell/broker services within the past 36 months. Indicate whether the registrant is actively providing services or not:

State: MA Status: Active Date Issued: 5/2016

State: DC Status: Active Date Issued: 7/2020

State: DE Status: Active Date Issued: 12/2019

State: IL Status: Active Date Issued: 9/2015

State: NJ Status: Active Date Issued: 9/2014

Please see attachment with additional states

(BUSINESS INFORMATION CONTINUED)

List all states in which registrant or its affiliates has been denied approval and/or had authority revoked:

None

List all municipalities in which the registrant will be performing door to door marketing activities in New York State. Further, provide an attachment including all municipality permits obtained by the registrant. If you do not market door to door, please indicate so in your response.

The registrant serves customers throughout New York State. However, the registrant does not engage in door to door solicitation and thus is not obligated to obtain municipal permits

2. CONTACT INFORMATION

THE CONTACTS LISTED BELOW MUST BE DIRECT CONTACTS FOR INDIVIDUALS, NOT FOR A SHARED MAILBOX OR GENERAL PHONE NUMBER.

EXECUTIVE CONTACT (OWNER, CEO, OR EXECUTIVE FOR NEW YORK SERVICE)

Name and Title: Aharon Gartenberg- President

Address: 18 Jule Ct

City: Lakewood State: NJ Zip Code: 08701

Direct Telephone: 732-637-9288 Fax: _____

Direct Email Address: aygart@lowerwatt.com

REGULATORY CONTACT (Individual(s) responsible for ensuring compliance with regulatory requirements, use additional sheets if necessary)

Name and Title: Leah Gray- Manager

Address: 1770 West County Line Rd Suite 102

City: Lakewood State: NJ Zip Code: 08701

Direct Telephone: 732-663-9288 Fax: _____

Direct Email Address: leah@lowerwatt.com

MARKETING CONTACT (Individual responsible for responding to consumer inquiries and complaints)

Name and Title: Leah Gray

Address: 1770 W County Line Rd Suite 102

City: Lakewood State: NJ Zip Code: 08701

Direct Telephone: 732-663-9288 Fax: _____

Direct Email Address: Leah@lowerwatt.com

K. A surety bond from an entity authorized to transact business as a surety in the State of New York the Superintendent of Insurance of New York State OR an irrevocable standby letter of credit from a reputable financial institution that identifies the Department of Public Service as the beneficiary in the amount of \$100,000 for Energy Brokers, \$50,000 for Energy Consultants.

4. SIGNATURE

The person signing this application attests to the following:

That he/she is an owner, partner, or officer of the business name on this registration package;

The answers and materials contained in this registration package are true; and,

The registration package is complete and accurate.

An Energy Broker and/or Consultant that knowingly makes false statements in this registration package is subject to denial or revocation of eligibility.

Print Name: Aharon Gartenberg

Title: President

Company Name: LowerWatt

Signature: 

Date: 6/10/20

Addendum #1:

Provide the contact information for any affiliates conducting energy-related business (including subsidiaries and parent corporations) within New York State or elsewhere.

Business Name: LW Utility Management LLC

Contact Name: Aharon Gartenberg

Address: 1770 W County Line Rd Suite 102

City: Lakewood State: NJ Zip: 08701

Telephone: 732-663-9288

Email Address: aygart@lowerwatt.com

Business Name: National Utility Auditors LLC

Contact Name: Avromie Rottenstrich

Address: 1770 W County Line Rd Suite 102

City: Lakewood State: NJ Zip: 08701

Telephone: 732-663-9288

Email Address: leah@lowerwatt.com

Addendum #2: List all states in which the registrant has received authority to sell/broker services within the past 36 months. Indicate whether the registrant is actively providing services or not continued:

State: OH Status: Active Date Issued: 2/2015

State: PA Status: Active Date Issued: 7/2015

State: TX Status: Active Date Issued: 8/2019

State: CT Status: Active Date Issued: 7/2023

State: MD Status: Active Date Issued: 7/2017