PSC NO: 220 ELECTRICITY NIAGARA MOHAWK POWER CORPORATION INITIAL EFFECTIVE DATE: APRIL 27, 2009

LEAF: 273 REVISION: 0 SUPERSEDING REVISION:

Part A. New Account Information – Continued							
(1) Name of Principal Owner, Partner or Officer		Title					
Home Address					State	Zip	
Social Security Number			Home Telephone				
(2) Name of Principal Owner, Partner or Officer		Title					
Home Address					State	Zip	
Social Security Number			Home Telephone				
(3) Name of Principal Owner, Partner or Officer			Title				
Home Address					State	Zip	
Social Security Number			Telephone				
Financial Institution Information							
Financial Institution A	Account	Type Account N		Account N	umber		
Address			City		State	Zip	
Part B. Service Classification							
The cost of service may vary depending on service classification. There are eligibility requirements for each service classification. A customer may be eligible for service under more than one service classification and certain classifications may be more beneficial than others. You may want to consult your contractor for help in completing this form.							
If the service classification information provided is inaccurate or incomplete, the customer may be subject to backbilling on the correct service classification, or may be precluded from receiving a refund for over charges based on the correct service classification.							
It is important for you to answer the following questions accurately and completely to determine the proper service classification for your account.							
1. SERVICE BEING REQUESTED: _Electric _Gas _Electric & Gas						tric & Gas	
2. DATE YOU ARE RESPONSIBLE FOR ACCOUNT:/							
3. Are you operating the same type of business as the previous occupant of this premise?YesNo							

Questions? Please contact our Commercial and Industrial Team at 1-800-664-6729 from 8am to 5pm Monday through Friday

Issued by Thomas B. King, President, Syracuse, NY