

PSC No: 5 Gas
Corning Natural Gas Corporation
Initial Effective Date: 04/01/2008

Leaf: 101
Revision 0
Superseding Revision:

X. Forms: (Cont'd.)

5. Deposit Alternative Notice Form:

CORNING NATURAL GAS CORPORATION

Request for Waiver of Security Deposit - Deposit Alternative

Date: _____

Customer's Name: _____

Service Address: _____

Mailing Address: _____

Account Number: _____

In consideration of Corning Natural Gas Corp. agreement to provide gas service to (Customer's Name) at the above service address and in lieu of a security deposit, I/we do hereby guarantee payment of all future bills for said service paid upon receipt.

I, the Customer, waive my right to be sent a Final Termination Notice normally provided after 20 days have elapsed since payment was due. I understand that my service can be terminated by Corning Natural Gas Corp. if I/we fail to pay any bill upon receipt. The company will send me a disconnect notice 5 days (8 days, if mailed) before actual termination of my service.

Once terminated, service will not be reinstated until payment in full of the following: (1) all amounts in arrears for service rendered, (2) the entire requested deposit, (3) service reconnection fees, and (4) any other billed tariff charges.

Corning Natural Gas Corp.

Business Name/Applicant

Date

Signed

Date

Signed:

Approved by:

Title

Title of person signing