

PSC No: 17 - Gas
Rochester Gas and Electric Corporation
Initial Effective Date: June 1, 2003

Leaf No. 94
Revision: 0
Superseding Revision:

GENERAL INFORMATION
12. FORMS (Cont'd)
Rochester Gas & Electric Corporation

LIFE SUPPORT AND SPECIAL NEEDS CUSTOMER STATUS FORM

The following information is confidential. Only the Energy Supplier and RG&E shall have access to this information. For a Life Support Customer, it is essential that all applicable areas of the form are completed, as this information will be used to notify the Customer of outages, and may be used to prioritize power restoration during emergency outages.

ENERGY SUPPLIER _____

General Customer Information

CUSTOMER OF RECORD _____ RESIDENT/CAREGIVER NAME _____

CUSTOMER OF RECORD SERVICE ADDRESS (Apt. #) _____
(Street) _____
(City, State, Zip) NY - _____
CUSTOMER OF RECORD PHONE NUMBER (Day) - - _____ (Night) - - _____

Life Support Customer Information

PATIENT NAME _____
RELATIONSHIP TO CUSTOMER _____
MEDICAL CONDITION _____
DOCTOR'S NAME _____
DOCTOR'S PHONE NUMBER - - _____

Life Support Customer Contacts

Contacts are any persons, other than household occupants, that can be reached at a different phone number and address in the event of an emergency.

CONTACT NAME (1) _____ (2) _____
ADDRESS 1 (Apt #) _____
(Street) _____
(City) _____
(State, Zip) _____
PHONE 1 - - _____
ADDRESS 2 (Apt #) _____
(Street) _____
(City) _____
(State, Zip) _____
PHONE 2 - - _____

ISSUED BY: James A. Lahtinen, Vice President Rates and Regulatory Economics, Rochester New York