

PSC NO: 219 GAS  
 NIAGARA MOHAWK POWER CORPORATION  
 INITIAL EFFECTIVE DATE: 07/25/05

LEAF: 234  
 REVISION: 1  
 SUPERSEDING REVISION: 0

#### Part B. Service Classification – Continued

#### 4. USE OF SERVICE FOR RESIDENTIAL PURPOSES:

- A.** Is any part of the structure served by this meter(s) used for RESIDENTIAL purposes, such as rooms for rent, apartments, or your own residence? ☐ Yes ☐ No (if answer is NO, go to number 5)
- B.** Are your residence and your business in the same structure and are both areas served by the same meter?  
☐ Yes ☐ No  
 1) How many individual rooms are devoted to your business? \_\_\_\_\_  
 2) Of the total area of the structure, what percentage of space is devoted to your business? \_\_\_\_\_  
 3) How many employees, if any, work for you at this location? \_\_\_\_\_
- C.** How many individual residential units are provided for the following ELECTRIC services?  
 Lighting \_\_\_\_\_ Heating \_\_\_\_\_ Water Heating \_\_\_\_\_ Cooking \_\_\_\_\_ Common area Lighting/Heating \_\_\_\_\_  
 (Basement, Hallway, etc.)
- D.** How many individual residential units are provided for the following GAS services?  
 Lighting \_\_\_\_\_ Heating \_\_\_\_\_ Water Heating \_\_\_\_\_ Cooking \_\_\_\_\_ Common area Lighting/Heating \_\_\_\_\_  
 (Basement, Hallway, etc.)

#### 5. ELECTRIC INFORMATION:

- A.** The amount of electricity you use and how you use it will generally determine the rate at which you'll be billed. Which of the following best describes your business or premises? (*Check only one*)
- ☐ Store, Restaurant, Commercial Office. Indicate Type: \_\_\_\_\_
- ☐ Medical or professional office building or suite
- ☐ Apartment or premises, in a residential building, where business is also conducted (doctor's office, beauty parlor, real estate, etc.)
- ☐ Hotel, motel, hospital, nursing home
- ☐ Religious use, such as a house of worship, living quarters for the clergy, rectory or parochial school
- ☐ Other (Describe) \_\_\_\_\_
- ☐ Which of the following best describes your use of electricity? (*Check only one*)
- ☐ Exclusively for hall lighting, elevators, and other common areas of apartment or commercial building
- ☐ Entire premises for your own use (Example: retail store)
- ☐ Entire premises, including redistributing electricity to: ☐ Residential tenant ☐ Commercial tenants
- C.** Do you have (*Check all that apply*):
- ☐ An emergency generator ☐ **Electric** space heating ☐ **Electric** hot water heating

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

Issued By: William F. Edwards, President, Syracuse, New York