

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

LEAF: 233
REVISION: 1
SUPERSEDING REVISION: 0

Part A. New Account Information – Continued			
(3) Name of Principal Owner, Partner or Officer		Title	
Home Address		State	Zip
Social Security Number		Home Telephone	

Financial Institution Information			
Financial Institution		Account Type	Account Number
Address		City	State Zip

Part B. Service Classification
<p>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.</p>
<p>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.</p> <p>It is important for you to answer the following questions accurately and completely to determine the proper service classification for your account.</p> <p>1. SERVICE BEING REQUESTED: <input type="checkbox"/> Electric <input type="checkbox"/> Gas <input type="checkbox"/> Electric & Gas</p> <p>2. DATE YOU ARE RESPONSIBLE FOR ACCOUNT: ____/____/____</p> <p>3. Are you operating the same type of business as the previous occupant of this premise? ____Yes ____No</p>

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