

..DID: 6166
..TXT: PSC NO: 218 GAS LEAF: 213
COMPANY: NIAGARA MOHAWK POWER CORPORATION REVISION: 2
INITIAL EFFECTIVE DATE: 01/04/99 SUPERSEDING REVISION: 1
STAMPS:
EFFECTIVE under authority of PSC 98-G-1324SP1 made 12/17/98
RECEIVED: 12/04/98 STATUS: Effective EFFECTIVE: 12/21/98

PART D. ADDITIONAL INFORMATION

1. **SALES TAX STATUS** What is sales tax status of your business? ____Taxable ____Non-taxable ____Partially Tax Exempt

IF YOU CLAIM TAX EXEMPTION, THE APPROPRIATE EXEMPT CERTIFICATION MUST BE ATTACHED TO THIS FORM.

2. **IDENTIFICATION NUMBER:** Enter Tax Payer Identification No., either your Employer Tax ID No. or your Social Security No.: _____

3. **BANK REFERENCE:** Name and Address of Bank: _____
Account in name of: _____

PART E. SIGNATURE

To the best of my knowledge, the information provided here is accurate and no attempt has been made to misrepresent the facts. By my signature below, I also acknowledge that I have been given the pamphlet entitled "**YOUR RIGHTS AND RESPONSIBILITIES AS A NON-RESIDENTIAL CUSTOMER**".

APPLICATION SUBMITTED BY: (NAME)	AFFILIATION TO PERSON RESPONSIBLE FOR ACCOUNT: ____ Owner ____ Partner ____ Corporate Officer ____ Agent ____ Other (explain) _____
FULL SIGNATURE:	TITLE:

Issued By: Darlene D. Kerr, Executive Vice President, Syracuse, New York