

..DID: 6165
 ..TXT: PSC NO: 218 GAS LEAF: 212
 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 B. SERVICE CLASSIFICATION (cont'd)

Do you have (Check all that apply): _____ An emergency generator _____ **Electric** space heating _____ **Electric** hot water heating

Have you made, or do you plan to make, wiring changes on this location? _____ Yes _____ No

5. **GAS INFORMATION:** The amount of gas you use and how you use it will generally determine the rate at which you will be billed. Which of the following best describes your business or premises? (Check only one)

Non-Human Needs

_____ Store, restaurant, commercial office
 _____ Religious use, as a house of worship,
 living quarters for the clergy,
 rectory or parochial school
 _____ Veterans* Organization

Human Needs

Apartment House _____
 Mobile Home Park _____
 Rooming or Boarding House _____
 Nursing Home _____
 Medical or Dental Office _____
 or Clinic _____
 General Medical or _____
 Psychiatric Hospital _____
 Correctional Facility _____

Check ALL the uses of gas which apply to this account:

_____ Hot water heating _____ Laundry dryers _____ Dual-fuel burner
 _____ Commercial cooking _____ Space heating _____ Gas redistribution to tenants for cooking
 _____ Gas air-conditioning _____ Electricity generator
 _____ Other _____

Have you made, or do you plan to make, gas piping changes to this location? _____ Yes _____ No

6. **ENERGY PROFILE:** (If you need help with this section, please call 1-800-664-6729.)

A. Do you use the same amount of electricity or gas each month? If not, please describe your usage pattern.

Electric service usage pattern

Kilowatt Hours (KWH) _____ Kilowatts (KW) _____

Gas Service usage pattern (therms per month) _____

B. Do you know what high consumption equipment you will be using? If so, enter below; if not, leave blank.

	ELECTRIC EQUIPMENT (Type (e.g., air conditioner))	Kilowatts (kW)	Horsepower (HP)	No. of Units
1.				
2.				
3.				

	GAS EQUIPMENT Type (e.g., furnace)	British Thermal Units (BTUs)	No. of units
1.			
2.			
3.			

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