

PSC NO. 219 GAS  
 NIAGARA MOHAWK POWER CORPORATION  
 INITIAL EFFECTIVE DATE: NOVEMBER 20, 2017

LEAF: 234  
 REVISION: 3  
 SUPERSEDING REVISION: 2

## B. Electric Information

1. The amount and nature/type of your electric usage will generally determine the rate at which you will be billed. Which of the following best describes your business or premises? (*Check only one*)
  - ☐ Store, restaurant, commercial office suite
  - ☐ Medical or professional office building or suite
  - ☐ Apartment or premises in a residential building, where business is also conducted (Example: doctor's office, beauty parlor, real estate, etc.)
  - ☐ Hotel, motel, hospital, nursing home
  - ☐ Religious use, as a house of worship, living quarters for the clergy, rectory or parochial school
  - ☐ Other (Describe) \_\_\_\_\_
2. 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 premise for your own use (Example: retail store)
  - ☐ Entire premise, including redistributing electricity to: ☐ Residential Tenants ☐ Commercial Tenants
3. Do you have the following? (*Check all that apply*)
  - ☐ An emergency generator
  - ☐ Electric space heating
  - ☐ Electric hot water heating
4. Do you know what high consumption equipment you will be using? If so, enter below. If not, leave blank.
 

Electric Equipment Type (i.e. air condition)	# of units	Kilowatts (kws)	Horsepower (HP)
5. You have a right to request that we perform an inspection to assure the accuracy of the meter(s) on which you will be billed. To request such an inspection please place an 'X' here: \_\_\_\_\_
6. Have you or do you plan to add or remove any equipment, make any renovations, or implement any changes to your business operations that would significantly increase or decrease the amount of electricity compared to the previous occupant?
  - ☐ Yes ☐ No If yes, please provide details: \_\_\_\_\_