

PSC NO. 4 GAS  
ORANGE AND ROCKLAND UTILITIES, INC.  
INITIAL EFFECTIVE DATE: August 1, 2017

LEAF: 89.1  
REVISION: 0  
SUPERSEDING REVISION:

### GENERAL INFORMATION

#### 13. FORM OF APPLICATION FOR SERVICE (Cont'd.)

##### 13.3 Application for Standby Generator (Cont'd.)

#### CONTRACTOR INFORMATION

Electrical Contractor (business name): \_\_\_\_\_

Contact Name: \_\_\_\_\_ Email Address: \_\_\_\_\_

Business Address: \_\_\_\_\_

Town: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Phone Number: \_\_\_\_\_ Fax Number: \_\_\_\_\_

Plumbing Contractor (business name): \_\_\_\_\_

Contact Name: \_\_\_\_\_ Email Address: \_\_\_\_\_

Business Address: \_\_\_\_\_

Town: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Phone Number: \_\_\_\_\_ Fax Number: \_\_\_\_\_

#### APPLICANT

Accordingly and with notice of foregoing, I hereby affirm that the foregoing statements of responsibility for payment of service are true. To the best of my knowledge, the information provided herein is accurate. I affirm that I have read and understand the obligations set forth in this application.

Applicant must submit generator specifications and automatic transfer switch specifications with the application. Applicant must also have gas compliance completed.

The Company's tariff is available for review on its website ([www.oru.com](http://www.oru.com)) or at Orange and Rockland's customer service centers upon request.

Signature (signature of account holder or applicant): \_\_\_\_\_

Name (name of account holder or applicant)-PLEASE PRINT \_\_\_\_\_

Date: \_\_\_\_\_

#### Orange and Rockland Utilities, Inc.

Signature: \_\_\_\_\_

Name - PLEASE PRINT \_\_\_\_\_

Date: \_\_\_\_\_

**Inadvertent contact with buried gas lines, cables or other utility lines can cause injury to workers and disrupt service to entire neighborhoods. Help avoid unnecessary system damage and prevent emergencies before they happen.**

**Remember to CALL 811, the nationwide "Call Before You Dig" number.**

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Issued By: Timothy Cawley, President, Pearl River, New York  
(Name of Officer, Title, Address)