

PSNC Energy Customer Authorization Form

	(Customer) hereby authorizes				
transactions involving the pur requests PSNC Energy to dea information regarding the acc Form is in effect.	directly with Shipp	per and Custo	nation of omer her	gas for the accour by requests that F	PSNC provide to Shipper all
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Exclusions: (Please check are Account Usage History		ccess is denic Billing Record		Other (Spec	cify)
PLANT NAME AND L	OCATION	(175 (RATE OR 180)	A	ACCOUNT NUMBER
prospective basis. Customer agrees to provide Ps changing the above shipper or	vice and understand SNC Energy with a	s that these prevised authors	procedure	s are subject to cl	nd terms as provided by PSNC hange from time to time on a seed nomination deadline prior to
Please Print or Type Contact Information*	-(g: , , , , , , , , , , , , , , , , , , ,	10			
	(Signature Require	ed)			(Date)
Name Title Company					
	1 ,	Phone No. Fax			
	Mailing Addres	SS			
	City, State, Zip				
Please send completed and signed forms to PSNC Ene			Mail: Fax:	Transportation & Administration PSNC Energy P O Box 1398 Gastonia, North Carolina 28053-1398 (704) 834-6555	

^{*} Please note that future transportation information will be sent to the contact that you provide above. Should there be a change in the contact information, please let us know.