



Application and Contract for Non-residential Customers

This is your application for gas service.

As a customer, you pay for the main and/or service supplied at the rates, charges and terms of your service classification as prescribed in our tariff and rate schedule.

Service classification and rates may change from time to time and our service will be supplied in accordance with all such changes. A copy of our current non-residential rate schedule and the tariffs are available in every business office and online. Customer representatives are also available to answer questions and provide assistance.

In addition, please visit [NationalGridUS.com/Long-Island-NY-Business](https://www.nationalgridus.com/Long-Island-NY-Business) which details your rights as a non-residential customer. It also explains our obligations and procedures for handling any inquiries you may have.

Please read and complete the entire gas application and load letter to the best of your knowledge. In the event the information you provide is not sufficient to process your application, we will notify you of the additional information required.

**Please be sure this application is signed in Part 5 before returning it to us.
Thank you.**

NOTE: Please fill out this application for each meter at this location.

PART 3 - SERVICE AND RATE CLASSIFICATION INFORMATION

Rates for each service classification are different because the cost to provide service is different. You, the customer, qualify for a service classification if you meet the eligibility conditions of that classification. Further, we will endeavor to assist in the selection of your most favorable rate classification.

If served by multiple rate classifications at the same location, you will not be permitted switchable thermal requirements (gas) between the multiple classification.

To insure proper billing, you must notify us in writing if use of service or equipment changes in the future.

Please answer the following questions accurately and completely. The information provided here will assist us in determining the proper service classification for your account. If service information you provide is inaccurate or incomplete, you may be subject to backbilling or may be precluded from receiving a refund for overcharges from the resulting incorrect billing.

TYPE OF BUSINESS	SIZE OF YOUR PREMISES SQUARE FEET
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DO YOU PLAN TO LIVE AT THE PREMISES?	IF YES, WILL THE SERVICE BE USED PRIMARILY FOR RESIDENTIAL PURPOSE?
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PREMISES USED FOR:

<input type="checkbox"/> CHURCH	<input type="checkbox"/> FACTORY	<input type="checkbox"/> RESTAURANT/CATERING HALL	<input type="checkbox"/> OFFICE	<input type="checkbox"/> MULTI FAMILY DWELLING
<input type="checkbox"/> SCHOOL	<input type="checkbox"/> HOSPITAL	<input type="checkbox"/> NURSING/ADULT HOME	<input type="checkbox"/> RETAIL	<input type="checkbox"/> 5 OR MORE UNITS
<input type="checkbox"/> THEATRE	<input type="checkbox"/> DAY CARE CTR.	<input type="checkbox"/> WAREHOUSE	<input type="checkbox"/> OTHER: _____	

DOES THE PREMISES CONTAIN A COMMUNITY ROOM, CAFETERIA OR MEETING ROOM WHICH HOLDS MORE THAN 70 PEOPLE? YES NO

NORMAL OCCUPANCY: 70 OR MORE 70 OR LESS

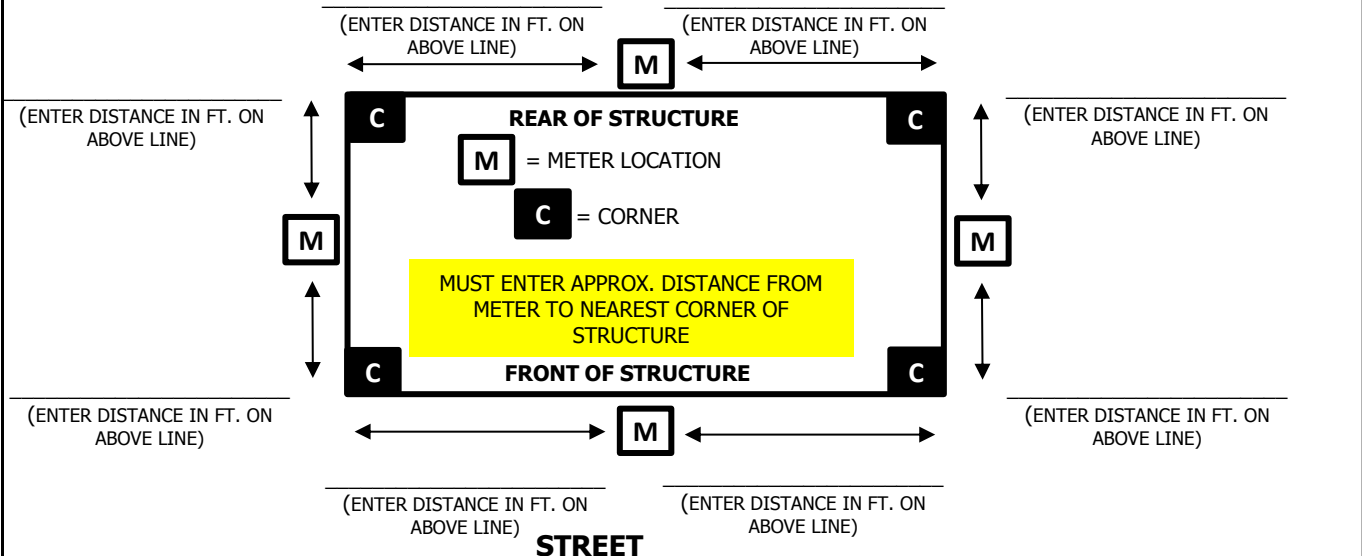
TYPE OF HEAT

<input type="checkbox"/> GAS	<input type="checkbox"/> ELECTRIC	<input type="checkbox"/> OIL	<input type="checkbox"/> OTHER: _____
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WHAT TYPE OF BUSINESS PREVIOUSLY OCCUPIED THIS LOCATION?

FUTURE GAS SITE INFORMATION

NOTE: Private property markout required prior to scheduling for all new commercial gas services



Cross Street(s): _____

FOR NEW CONSTRUCTION AND BUILDING RENOVATIONS THE JOB SITE IS CONSIDERED READY FOR GAS SERVICE INSTALLATION WHEN THE FOLLOWING CRITERIA ARE MET:

- Installations of sewer, water and all underground utilities have been completed.
- The building is secured and enclosed. An enclosed building means the walls, windows and roof of the building have been completed.
- The location of the new gas service is level to final grade, free of debris and scaffolding.

REMINDER: PHOTOS OF JOB SITE READINESS ARE REQUIRED BEFORE SERVICE CAN BE SCHEDULED

PART 4 - DEPOSIT INFORMATION

New non-residential customers are required to pay a deposit when applying for service. The deposit amount shall not exceed the cost of twice the expected monthly usage for a peak season. The deposit is subject to later upward or downward revision based on actual subsequent billing. You may request that your account be reviewed in order to assure that the deposit is not excessive. Deposit alternatives which provide a level of security equivalent to cash, such as irrevocable bank letters of credit and surety bonds, may be accepted.

**PART 5 - SIGNATURE
FOR GAS REQUEST TO NATIONAL GRID:**

MANDATORY: THE APPLICATION CERTIFIES THAT: (Please Check Either A or B)
 AFFIX CORP.
 SEAL HERE
 (OR CASH AND FILM NOS.)
 OR
 CERTIFIED COPY OF
 BUSINESS CERTIFICATE
 IF NOT A
 CORPORATION

A) I am the owner of the real property onto which proposed service facilities shall be installed and further, I am aware that the Utilities are not responsible for the permanent restoration on private property.

B) I have obtained the permission of the owner to install Gas service facilities and further, that said owner is aware that the Utilities are not responsible for permanent restoration on private property

In addition, applicant understands that if the Utility installs a new gas service facility at applicant's request and the service is not used within 6 months, applicant must pay for the entire installation cost in accordance with Gas Tariff.

I/WE CERTIFY THAT THE ABOVE NAMED CORPORATION/BUSINESS IS DULY ORGANIZED AND EXISTING UNDER THE LAWS OF _____

THE APPLICANT FURTHER AGREES TO PAY THE APPLICABLE RATES AND CHARGES FOR THE GAS SERVICE HEREIN REQUESTED AND THAT THE APPLICANT WILL BE BOUND BY AND COMPLY WITH THE RULES AND REGULATIONS OF THE COMPANY APPLICABLE THERETO.

X _____
 SIGNATURE OF OWNER, OFFICER OR AUTHORIZED AGENT

 DATE SIGNED

 PRINT NAME AND TITLE

 SIGNATURE OF UTILITY REPRESENTATIVE

EMPLOYEE NO.: _____

PART 6 - PLEASE DO NOT WRITE IN THIS AREA - FOR OFFICE USE ONLY

ACCOUNT NUMBER	CATEGORY CODE	GAS RATE CODE
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DEPOSIT AMOUNT	RECEIPT NUMBER	DATE PAID
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