



RESIDENTIAL AGREEMENT FOR NATURAL GAS SERVICE

Date: _____ Business/ Entity Name: _____

This acknowledges my request for Natural Gas Service for _____,
Street Address
_____, _____, _____, _____
Town County State Zip

I understand that I will be allowed up to 100 feet of service line at no charge **IF**

1. The estimated gas load is at least equivalent to central gas heating. If it does not I will be pre-informed of the cost and can revoke the agreement at that time.
2. I begin taking gas within (90) ninety days of the date Frontier Natural Gas Company installs the service line **and**
3. Natural gas is made available to the above noted address.

Additional Requirements:

If it becomes necessary for Frontier to bill me for the service line because I failed to start using gas within (90) ninety days, the charges will include all cost incurred for installation. The billable footage will include all the service line installed beginning at the main distribution pipeline and continuing up to the riser / meter. I further understand that any payment made as a result of not using gas within (90) ninety days of availability will remain the property of Frontier Natural Gas Company until I begin using gas. Funds collected will not accrue interest. If I do not begin gas service within (36) thirty-six months of availability, I understand that I will not recover any payments that I have made.

Be advised that piping downstream of the meter is owned, operated and maintained by the customer. Please read and sign the attached "Non Maintenance of Customers' Piping" Notice.

Authorized By:(Print) _____ Authorized Signature: _____

Address: _____ City: _____ County: _____

State: _____ Zip: _____ Phone: () _____ - _____ SSN or FED ID: _____

Owner Manager Contractor Renter Other _____

(if the applicant is NOT the land owner, the land owner must agree and sign below)

I hereby authorize and grant Frontier Natural Gas Company right of way to serve natural gas to my property at the address below.

Owner: (Print) _____ Owner Signature: _____

_____, _____, _____, _____
Street Town / City State Zip

Owner's Address: _____

Contact Phone Number: () _____ - _____

The foregoing terms accepted by Frontier Natural Gas Company

Sales Representative: Kim Carter



APPLICATION FOR RESIDENTIAL GAS SERVICE

Premise Information

Customer update only

Location/Address				<input type="checkbox"/> Prem already served Prem I.D. _____ SIC: _____ Acct No. _____ <input type="checkbox"/> Existing <input type="checkbox"/> New Const. Tariff Rate: _____ Tract/Parcel _____ Lot(s) _____ <input type="checkbox"/> Commercial <input type="checkbox"/> Food Service <input type="checkbox"/> Industrial No. Buildings: _____ Stories: _____ Sq. Ft. _____
City	County	State	Zip	
Cross Street		Project No.		

CUSTOMER INFORMATION

Customer Name		Phone (w/area code)	Billing Name (if different)		Phone (w/area code)
Tax I.D.		Parent Company (If applicable):			
Mailing Address (Include apt or unit no. Not P.O. box)			City:		State
Person to be Contacted & Title:			Phone (w/area code)	Fax (w/area code)	Deposit Collected
Pager No. (with area code)	Cellular No. (with area code)	Email Address		Remarks	

CONTACT FOR PREMISE (If New Construction)

Name		Title	Relationship to Cust.		
Address		City	State	Zip	Phone (w/area code)

DATE FOR GAS FACILITY INSTALLATION

Premise/Site is ready now Est. Gas Construction start Date: ____/____/____ Est. final build-out Date: ____/____/____

GAS LOAD INFORMATION (Gas appliances & equipment being installed and associated load)

The following is **REQUIRED** to process your application

Please list all equipment (New & Existing)	NEW	EXISTING	Equipment Type	QUANTITY	Equipment Input per Unit (MBTU/hr.)	Operating Schedule			Type of Alternate Fuel (If applicable)	Equipment Function
						(Hrs/day)	(Days/wk)	(Mos./yr)		
Example:	X		Boiler	1	2,500	18	7	12	Propane	Space Heating
Item 1										
Item 2										
Item 3										
Item 4										
Item 5										
Item 6										
Item 7										

CUST SER MGR REVIEW: _____ **CREDIT SUPPORT REQ'D:** YES NO **AMOUNT:** \$ _____

MARKETING CONTACT NEEDED YES NO **TO BE COMPLETED BY OPERATIONS ONLY:**

Type of Installation to serve this request: <input type="checkbox"/> Exist OK <input type="checkbox"/> Main <input type="checkbox"/> Service <input type="checkbox"/> MSA <input type="checkbox"/> Stub(s) <small>(Check all that apply)</small>					
Method of Installation: <input type="checkbox"/> Joint Trench <input type="checkbox"/> Gas-Only Trench Req Del Press: <input type="checkbox"/> 8" W.C. <input type="checkbox"/> 5 Pounds <input type="checkbox"/> Other: _____					
Gas Installation Start Date: ____/____/____ Ready-to-serve date: ____/____/____ Contract mailed date: ____/____/____					



AUTHORIZATION TO RELEASE CREDIT INFORMATION

Residential:

Name: _____ Date: _____

_____, _____, _____, _____
Street Address City/ Town State Zip

Social Security Number _____

Please be advised that I wish to open a credit account with Frontier Natural Gas Company. I hereby authorize that a credit history report be released to Frontier Natural Gas Company by any applicable credit agency that Frontier may choose. I may wish to not open a credit account but I still authorize my credit history report be released to Frontier Natural Gas Company. I understand that a deposit may be required if my credit score is under 650.

Signature

Date

Disclaimer

The reports obtained by Frontier Natural Gas Company are for its exclusive use for the purpose of evaluating the credit worthiness of the authorizing individual. Information is obtained from a multitude of database, record keeping systems, and other sources over which Frontier Natural Gas Company has no control. Frontier Natural Gas Company does not warrant the accuracy of the information received.

Frontier Natural Gas Company, certifies that it understands the Fair Credit Reporting Act which provides that anyone “ who knowing obtains information on a consumer from a consumer reporting agency under false pretenses shall be fined not more than \$5000 or imprisoned not more than a year, or both”.



NON-MAINTENANCE OF CUSTOMERS' PIPING NOTICE

Per 49 CFR, 192.16 Frontier Natural Gas Company is required to notify you that Frontier Natural Gas Company owns and maintains only the gas piping that delivers gas to the gas meter. Piping downstream of our meter, including buried yard line and the piping in the walls of buildings, is owned, operated and maintained by the customer, not Frontier Natural Gas Company.

Customers' piping that is not installed, operated and maintained properly can be a source of hazard due to corrosion and leakage. Customers should retain the services of a licensed plumber or heating contractor to periodically check their piping system to be sure it is gas-tight and free of corrosion. This is especially true for buried metallic piping, which can corrode quickly if exposed to the soil.

Corrosion, leakage or other unsafe conditions should be repaired promptly by a qualified professional.

If you are unsure of the safety of your gas piping, contact a licensed plumber or heating contractor, or call Frontier Natural Gas Company at 336-526-2690 for assistance. For your convenience, you may also call Frontier Natural Gas Company's toll free number: 800-537-2545.

Buried gas lines can also be damaged by excavating, including shallow excavating done by hand. Persons planning to excavate should contact North Carolina One-Call at 1-800-632-4949 a minimum of 48 hours prior to beginning the excavation(s). One-Call notifies companies having buried lines in the vicinity to locate their lines for you at no charge. It is your responsibility to carefully expose and protect buried lines in the area of your excavation.

SIGNATURE: _____ DATE: _____



**RATE SCHEDULE 101
RESIDENTIAL FIRM SERVICE**

APPLICABILITY

This rate schedule is available to Residential Customers in residences, condominiums, mobile homes or individually metered apartments where natural gas is used for domestic purposes. Separate meters, separate accounts, and separate locations may not be combined for billing under this Schedule.

RATE

The applicable monthly facilities charge and the Natural Gas charge for this Schedule are set forth in the currently effective Rate Schedule 100 of this tariff, which is incorporated by reference.

The minimum monthly bill is the amount of the facilities charge. The facilities charge shall not be prorated for changes of service during a billing cycle.

PAYMENT OF BILLS

Bills are due and payable upon receipt and become past due 25 days after the billing date. A late payment charge of 1% per month will be added to all customers' balances of \$10 or more not paid within 25 days after the billing date.

A charge will be made for checks returned by the Customer's bank for insufficient funds. Reconnection charges will be made to restore service: (a) which was discontinued and reconnected at the request of the Customer at the same premises within the past year; or (b) which was discontinued for nonpayment of bills. These charges are set forth in the Company's approved Rules & Regulations.

RIGHT OF WAY

The customer shall at all times furnish Frontier a satisfactory and lawful right-of-way, at no cost to Frontier Natural Gas Company, through the customer's premises for Frontier Natural Gas Company equipment necessary or incidental to the furnishing of service. The customer shall also furnish satisfactory protection for Frontier equipment installed on the premises. Right of way shall be inclusive of service line, main line, including any necessary farm tap or regulation needed to obtain gas service on or through stated property.

Frontier Natural Gas Company's obligation to supply service is dependent upon its' securing and retaining all necessary rights-of-way for delivery of such service. Frontier Natural Gas Company shall not be liable to the Customer for any failure to deliver service because of Frontier's inability to secure or retain such right-of-way.

A request for service and the customer's acceptance of such service from Frontier Natural Gas Company shall be deemed to be a granting to Frontier of an implied right-of-way over the premises.



Frontier Natural Gas Company's marketing representative, Kim Carter, has explained the process by which I may become a natural gas customer. I have signed all of the following documents:

- Service Agreement
- Authorization to Release Credit Information
- Non-Maintenance of Customer Piping

I have been given a copy of the following documents for my records.

- 101 Rate Schedule
- Current Rate & Charges Schedule
- Steps Required Prior to Meter Set and Turn On

I further understand that my rate classification, 101, is based on the information I submitted.

I have been informed that the current rate is subject to change.

I have been provided with copies of all signed documents.

I authorize to give my mailing address, phone number, email address information to the list of our preferred contractors for the sole purpose of contacting customer to give a cost of conversion / installations. Customer can use anyone that is licensed and certified that is not on the list if they choose.

I authorize Frontier Natural Gas Company to send my information to Contractors.

I wish to contact my own contractor (Don't release my information)

To: Frontier Natural Gas Company
110 PGW Drive
Elkin, NC 28621

Signature

Date