PSNC Energy
Customer Authorization Form

_____ (Customer) hereby authorizes _____ (Shipper) to act on Customer's behalf for all transactions involving the purchase, transportation, and nomination of gas for the account(s) listed below. Customer requests PSNC Energy to deal directly with Shipper and Customer hereby requests that PSNC provide to Shipper all information regarding the account(s) identified below, except as excluded below, for as long as this Authorization Form is in effect.

Exclusions: (Please check areas where Shipper access is denied.)

☐ Account Usage History ☐ Accounting/Billing Records ☐ Other (Specify) _____

PLANT NAME AND LOCATION		SALES RATE (145 OR 150)		ACCOUNT NUMBER

Notice to the Shipper constitutes notice to Customer. Customer accepts the procedures and terms as provided by PSNC Energy for transportation service and understands that these procedures are subject to change from time to time on a prospective basis.

Customer agrees to provide PSNC Energy with a revised authorization form by the required nomination deadline prior to changing the above shipper or designated accounts.

Please Print or Type
Contact Information**

_____
(Signature Required) (Date)

Name _____
Title _____
Company _____
Phone No. _____ Fax _____
Mailing Address _____
City, State, Zip _____

Please send completed and signed forms to PSNC Energy: Mail: Large Customer Group
PSNC Energy
P O Box 1398
Gastonia, North Carolina 28053-1398
Fax: 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.