GAS TRANSPORTATION CUSTOMER APPLICATION/SWITCH FORM
DAILY METERED

NYSEG

Completed Forms should be emailed to: gastransport@nyseg.com (Forms with incomplete information will not be processed)

MARKETER INFORMATION

Marketer: | Submittal Date: | Phone:

Marketer Fed Tax ID#: (9 digits-no dashes) | Nominations Contact: | Email or fax#:

CUSTOMER INFORMATION

Customer (Billing) Name	NYSEG Acct # (15 Digits) No Dashes	Service Address	Meter # (optional)	Start/Switch Date	**Gas Agg Rate NYSEG use only	Supplier Acct #	Pipeline- TCO, TCO/OLEAN, DTI, IGTS, NCPL, O&R, TGP, AGT	Transp.Svc Class SC1, 2, 5, 13 or 14

IMPORTANT FACTS:

Program	Description	Meter Read	Switch/Enrollment Requirements
Daily	Require telemetering equipment	Daily	Enroll - 30 calendar days Switch - 4 business days prior to 1st of montl
Non-Daily	Aggregation	Monthly or Bi-Monthly	Switch/Enrollment - 10 calendar days prior to 1st of month