

**COLUMBIA GAS OF PENNSYLVANIA, INC.
GENERAL DISTRIBUTION APPLICATION & AGREEMENT**

Legal Entity/ Corporation
Name ("Customer"): _____

Customer DBA: _____

Customer
Billing Address: _____
Street City State Zip

Contact Name: _____

E-Mail _____ Phone _____ Fax _____
(This section should be filled out using the facility's accounts payable information. If invoices are to be mailed to the Agent/3rd Party,
a "Request for Mailing Address Change" form must also be completed)

CONTRACT# _____

THIS AGREEMENT, made and entered into as of the ____ day of _____, 20____, by and between
COLUMBIA GAS OF PENNSYLVANIA, INC., ("Company") and _____
("Customer").

WITNESSETH: Customer is a user of natural gas with facilities in Pennsylvania at specific locations
listed in General Distribution Addendum; and

Section 1. Distribution Service to be Rendered. In accordance with the provisions of the effective
applicable distribution rate schedule of Company's Tariff, on file with the Pennsylvania Public Utility
Commission, and the terms and conditions herein contained, Company shall receive the quantities of gas
requested by Customer to be transported and shall redeliver said gas to Customer's facilities. The Delivery
Point, Customer facility location, the applicable Rate Schedule, and the service and levels of services to be
rendered, shall be set forth in the General Distribution Addendum of this Agreement.

Section 2. Incorporation of Tariff Provisions. This Agreement expressly incorporates by this reference
all of the terms and conditions governing Company's General Distribution Service (GDS) in the Rules
Applicable to Distribution Service and applicable distribution rate schedules, included in Company's
approved Tariff, as well as any general terms and conditions of that Tariff applicable to, and consistent with,
Company's applicable rate schedule. In all events, the terms and conditions of Company's applicable rate
schedule shall be controlling.

Section 3. Regulatory Approvals. This Agreement shall be expressly contingent upon the receipt of
such regulatory approvals or authorizations as may be required and in the event such approvals or
authorizations terminate or are withdrawn, then this Agreement shall terminate.

Section 4. Term. The initial term of this Agreement shall be from the date Company first delivers quantities
of gas to Customer at its facilities pursuant to this Agreement until the first of the following November,
provided, however, that the Agreement shall continue in effect after that date on a year-to-year-basis. Either
party may terminate this Agreement, upon written notice sixty (60) days prior to an effective date of
termination, subject to the provisions of this Agreement and the applicable rate schedule.

Section 5. Notices. Any notices to Customer or Company, except those relating to billing or interruption of
service, required or permitted to be given hereunder shall be effective only if delivered in compliance with
the "Customer Notices" and "Company Notices" provisions in the General Distribution Addendum of this
Agreement.

Section 6. Cancellation of Prior Agreements. This Agreement supersedes and cancels, as of the effective date hereof, all previous two party Distribution Agreements between the parties for service to Customer's facilities served hereunder.

Section 7. Energy Usage Information. The Maximum Daily Quantities and the Annual Quantity to be distributed by the Company must be specified for each facility on the General Distribution Addendum. If the Customer does not want to determine the Maximum Daily Quantities and the Annual Quantity required for each facility, the Customer has the option of having the Company calculate those figures. In accordance with the Company's Tariff, the summer and winter maximum daily quantity that is currently effective and Annual Quantity specified on the General Distribution Addendum are subject to adjustment by the Company no more than one time each year, to reflect the Customer's then currently effective Maximum Daily Quantities and Annual Quantity. Upon notice to the Customer, adjusted quantities will become the new contractual quantities. Additionally, an adjustment to the currently effective Maximum Daily Quantities and Annual Quantity may be made at any time upon agreement of the Customer and the Company.

Section 8. Banking and Balancing Information. The Customer understands and agrees that the applicable rate schedule, and the bank tolerance for each facility is subject to change annually, based on each facility's annual individual consumption that occurred during the previous November through October period. If applicable, the change will become effective with the January billing cycle of the following year. Bank tolerances and rate schedules will be determined in accordance with the Tariff.

Section 9. Interruption. The Customer understands and agrees that under the Character of Service to be Rendered provisions as specified in the Rules Applicable to Distribution Section of the Company's Tariff, interruption of gas distribution or gas deliveries may occur for Customers with less than 100% backup service.

In the event that interruption of gas service is required, one of the following persons should be contacted. At least **two** Employee names authorized by the Customer with contact numbers (no fax numbers or Agent/3rd Party names please), and Email addresses for each:

Contact Name _____ Email Address _____

Phone _____ (24 Hour) _____

Contact Name _____ Email Address _____

Phone _____ (24 Hour) _____

IN WITNESS WHEREOF, the parties hereto have accordingly and duly executed this Agreement as of the date hereinabove first mentioned.

CUSTOMER

COLUMBIA GAS OF PENNSYLVANIA, INC.

By: _____ By: _____
(Signature of Authorized Employee of Customer)

Title: _____ Title: _____

Effective Billing Month/Year _____

Nomination Group _____

GENERAL DISTRIBUTION ADDENDUM**A. Delivery Points**

The Delivery Points shall include those points authorized by the Company from time to time with one or more of the following pipelines:

- | | |
|------------------------------------|---------------------------------------|
| 1) Columbia Gas Transmission (TCO) | 2) Equitrans (EQT) |
| 3) Dominion Transmission (DTI) | 4) National Fuel (NATL) |
| 5) Tennessee Gas Pipeline (TEN) | 6) Texas Eastern Transmission (TETCO) |

B. Facility Address: _____

(See Multiple Facility Attachment for additional facilities)

PCID: _____ PSID: _____

C. Type of Business	D. Energy Usage Detail: To be completed by Customer. *As specified on General Distribution Application & Agreement						
Description of Business:	Maximum Daily Quantity (MDQ) (thm)	*Annual Quantity (thm)	Daily Metered Equipment Outage Election	Operable Alternate Fuel:	Essential Human Needs Use (Per Tariff definition)	Standby Service Daily Quantity (thm)	Standby Service Annual Quantity (thm)
	(Optional & Subject to approval by Company)	(Optional & Subject to approval by Company)	(Per Tariff definition) <input type="checkbox"/> MDQ Option <input type="checkbox"/> Usage Option	Type %	YES NO	(Subject to approval by Company)	(Subject to approval by Company)

Customer Notices: (Mailing address for Contract) (Please Print)	Company Notices
Company Name:	Columbia Gas of Pennsylvania, Inc
dba (if applicable):	290 W. Nationwide Blvd.
Address:	Columbus, Ohio 43215
City, St, Zip:	
Attn:	Title:
Telephone #: () -	Attn: Gas Transportation
Fax #: () -	
E-mail Address:	

IN WITNESS WHEREOF, the parties hereto have accordingly and duly executed this Agreement as of the date herein above first mentioned.

CUSTOMER**COLUMBIA GAS OF PENNSYLVANIA, INC.**By: _____
(Signature of Authorized Employee of Customer)By: _____
(Signature)Printed: _____
Title: _____Printed: _____
Title: _____**DO NOT WRITE BELOW THIS LINE-For Columbia Personnel Only - NOTE All Information is subject to change.**

	Monthly Bank Tolerance	Daily Metering Service	Pipeline Scheduling Point (PSP)	UN/BK	GMB#	MS#
<input type="checkbox"/> New Customer	5 %	<input type="checkbox"/> Y <input type="checkbox"/> N				
<input type="checkbox"/> New Facility	10% (5% in October)			SIC Code	Invoice #	Rate Schedule
<input type="checkbox"/> Replacement						

APPROVAL:

Company Representative: _____ Date: _____

Comments: _____ Effective Date: _____

APPOINTMENT OF AGENT

KNOW ALL MEN BY THESE PRESENTS that _____ ("Customer") does hereby make, constitute and appoint _____ ("Natural Gas Supplier (NGS)") as its **AGENT** in accordance with the Rules Applicable to Distribution Service section of the Company's Tariff for the purpose of establishing and administering a gas distribution program on the Columbia Gas of Pennsylvania, Inc. ("Columbia") system for and on behalf of Customer, including (by way of illustration and not limitation) the following: request gas distribution service with Company; obtain Customer's historic and current usage data from Columbia; nominate gas distribution quantities on behalf of Customer; direct Company to send Customer's bill (utility and transport) directly to the NGS; and obtain from Company any information pertaining to prior or current month gas deliveries to Customer, including disbursed quantities, tariff quantities, banked quantities and bank tolerances.

ACKNOWLEDGEMENT OF SERVICES PROVIDED UNDER THE GENERAL DISTRIBUTION SERVICES APPLICATION AND AGREEMENT

By executing this Addendum, Customer is selecting a new agent and agrees to continue to be bound by the terms and conditions of the existing General Distribution Application and Agreement between Customer and Columbia. The Company shall provide General Distribution Service (GDS) to the Customer in accordance with the Rules Applicable to Distribution Service section of the Company's Tariffs to the facilities and at the quantities specified on the General Distribution Addendum, which is hereby incorporated by reference and made part of this Agreement. Pursuant to the Rules Applicable to Distribution Service section of Columbia's Tariff, the Customer remains fully responsible to the Company for the payment of any invoices, fees, imbalance purchases, banking and balancing charges, OFO or OMO charges, penalties or other charges arising out of the NGS's provision of natural gas supply services to the Customer, including any differential between the price offered by the NGS and the rate charged by Company in the event that the NGS discontinues service or defaults on its contract before its contract with the Customer has expired.

AGGREGATION SERVICE OPTIONS

A Customer may choose Non-Aggregation Service or Aggregation Service subject to the provisions of the applicable Rate Schedule in the Company's Tariff as well as the Rules Applicable to Distribution Service section of the Tariff. Should the Customer's annual quantity be 64,400 therms or less, Aggregation Service is required.

In the event an agent is selected and an aggregation choice is not made, the default will be Aggregation Service. (Check & Initial One Only):

☐

Non-Aggregation Service (Stand Alone):

Customer Initials: _____

☐

Aggregation Service:

Customer Initials: _____

Elective Balancing Service (EBS) Election: _____

(must match election made in August or September prior to the effective April, unless new GDS customer)

The customer agrees to take service under Rider EBS- Elective Balancing Services. The customer may elect to change its option no more than one time per year. (Per the Elective Balancing Service section of the Companies Tariff). If a request to change is not received, the customer will default to Option 1 – Full Balancing Service.

APPOINTMENT OF AGENT

Acct. No. _____
Acct. No. _____
Acct. No. _____
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Acct. No. _____
Acct. No. _____

Acct. No. _____
Acct. No. _____
Acct. No. _____
Acct. No. _____
Acct. No. _____
Acct. No. _____

CUSTOMER (Authorized Employee Information):

EXECUTED BY CUSTOMER: _____
(Must be signed by Authorized Employee of Customer)

(Please Print Authorized Employee Name)

Title: _____ **Address:** _____

Phone No.: _____ **Fax No.:** _____

E-Mail Address: _____ **Date:** _____

AGENT (Authorized Employee Information):

EXECUTED BY AGENT: _____
(Must be signed by Authorized Employee of Agent)

(Please Print Authorized Employee Name)

Title: _____ **Address:** _____

Phone No.: _____ **Fax No. :** _____

E-Mail Address: _____ **Date:** _____

EXECUTED BY COLUMBIA: _____
(Must be signed by Authorized Employee of Columbia)

Name _____ **Address:** 290 W. Nationwide Blvd., Columbus, OH 43215

Title: _____ **Date:** _____