

Customer Request Form



Please check Utility: Wisconsin Gas LLC Wisconsin Electric - Gas Operations

Account name: _____

Service address: _____

City, state, zip: _____

Customer contact name: _____

Customer contact phone: _____ Customer contact fax: _____

Account number: _____ **Meter number:** _____

Current account status: First time starting service? Yes No (If yes, complete payment option)

Telemetry payment option (if applicable) per meter: 1,250 lump sum or 12 equal monthly payments

Marketer Name (if applicable): _____

Current Rate Schedule

- FG _____ Commercial/Industrial Class - Sales Service (1-8)
- TF _____ Commercial/Industrial Transportation Class - Telemetered Transportation Service (1-8)
- IG _____ Commercial/Industrial Interruptible Class - Sales Service (4-8)
- Other _____

Requested Rate Schedule

- FG _____ Commercial/Industrial Class - Sales Service (1-8)
- TF _____ Commercial/Industrial Transportation Class - Telemetered Transportation Service (1-8)
- IG _____ Commercial/Industrial Interruptible Class - Sales Service (4-8)
- Other _____

Estimated annual use in therms: _____ Maximum daily quantity in therms: _____

North American Industrial Classification System (NAICS) number: _____

Requested start date for new account status: _____

Requested By

Customer name (print): _____ Title: _____

Customer's authorized signature: _____ Date: _____

Note: Application must be made in advance of requested start date to insure all administrative and tariff requirements are met. Please call your Gas Service Manager or the Transportation Center at 800-664-0007 for information. This change will not occur until all applicable tariff requirements have been met. This includes a credit review, which may result in a deposit request.