PSC No:4 Gas Leaf: 92 Corning Natural Gas Corporation Revision: 0 Initial Effective Date: 10/01/2003 Superseding Revision: Forms: (Cont'd.) Form of Application for Non-residential Service: (Cont'd.) Rate and Applicable Charges for Service: (To be completed by Company) Service Classification _____ Account No. _____ Amount of Deposit \$_____ Deposit No. _____ Extension Minimum \$_____ Percent Tax Exempt_____ Estimated Usage Corning Natural Gas Corporation is hereby requested to furnish the undersigned with gas service at the above address; such service is to be supplied by the Company under its tariff rates, rules, and regulations on file with the New York State Public Service Commission, as may be revised from time to time and to be paid for by the undersigned in accordance with the applicable rate. Response date: _____ Date of Responsibility:____ Company Name: Customer Signature:______Title:_____ Date:_____

Approved by:______Accepted by:______
Date: ______Title:______

Date: