

..DID: 4843  
 ..TXT: PSC NO: 1 GAS LEAF: 83  
 COMPANY: MARKETSPAN GAS CORPORATION DBA BROOKLYN UNION REVISION: 0  
 INITIAL EFFECTIVE DATE: 12/01/98 SUPERSEDING REVISION:  
 STAMPS:  
 CANCELLED effective 06/29/99  
 RECEIVED: 07/31/98 STATUS: Cancelled EFFECTIVE: 07/01/99

**GENERAL INFORMATION****IV. Forms for Gas Service (continued):****1 B. Application and Contract, Non-Residential Customers (continued):****PART 3 - SERVICE CLASSIFICATION INFORMATION (continued):**

Please answer the following questions accurately and completely. The information provided here will assist the Company in determining the proper service classification for your account.

Business		Premises		Type of Square Feet	Do You Plan to Live at	If Yes,, Size of
Will the Service be Used						
The Premises? Yes		No		Primarily For Residential Purposes? Yes		No
Used For		Office	Retail	Warehouse	Factory	Other
Previously Occupied This Location?				Type of		
Heat <input type="checkbox"/> Gas <input type="checkbox"/> Electric <input type="checkbox"/> Oil <input type="checkbox"/> Other				ELECTRIC		Estimated

**GAS**

1) Service used for:	Monthly Load	1) Service used for:
<input type="checkbox"/> Hall lights, elevator		<input type="checkbox"/> Cooking
and other common areas only.		<input type="checkbox"/> Hot Water
<input type="checkbox"/> Lights	_____ kw	
<input type="checkbox"/> Motors _____ HP	_____ kw	
<input type="checkbox"/> Miscellaneous Equip.	_____ kw	<input type="checkbox"/> Air Conditioning
	_____ kw	<input type="checkbox"/> Heating
	_____ kw	<input type="checkbox"/> Alternate Fuel
	_____ kw	<input type="checkbox"/> Temperature Controlled
<input type="checkbox"/> Air Conditioning	_____ kw	<input type="checkbox"/> Interruptible
<input type="checkbox"/> Heating	_____ kw	<input type="checkbox"/> Transportation
TOTAL	_____ kw/mo	

2) Estimated Elec. ☐ 0-7 kw ☐ 8-500 kw  
 500 kw ☐ Unknown for new or additional location?

2) Is your application Monthly Demand ☐ Over  
 gas use at this

3) Is there any significant change  
 customer? significant change  
 previous customer?

3) Is there any in use from the previous  
☐ Yes ☐ No in use from the  
☐ Yes ☐ No

Describe Change: \_\_\_\_\_

Describe Change: \_\_\_\_\_

An electric load letter is required if there is no existing service to the premises. An electric load letter may also be required if there will be a significant increase in electric usage (as determined solely by "Brooklyn Union") from the previous occupant. An electric load letter can be obtained from your electrician or architect/engineer.

Issued by Kathleen A. Marion, Secretary  
 175 East Old Country Road, Hicksville, NY

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Status: CANCELLED  
Effective Date: 07/01/1999

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