

York County Natural Gas Authority Residential Customer Change Form

I Need To (please check one):

- Transfer My Current Service Add an Additional Location Turn Off My Service
 Change My Rate Only Change Mailing Address Only Stop/Change/Start Bank Draft Service

Section 1: Customer Information

PLEASE PRINT

Account Holder Name	Current Account Address	Social Security Number
Home Phone Number	Daytime Phone Number	E-Mail Address
Mailing or Forwarding Address (if different from Service Address)	City/State	Zip Code

Section 2: Location Information

Start Service Date	<input type="text"/>	Turn Off Date	<input type="text"/>
	For Add Location or Transfer		For Transfer or Turn Off
New Service Address (Adding a Location or Transfer Only)		Zip Code	
Own or Rent (circle one)	If Rent, we require	Landlord Name	Phone Number
Bank Draft Service:	<input type="checkbox"/> My Current Location is on Bank Draft, Please Draft My New Location		
<input type="text"/>	<input type="checkbox"/> My Current Location is on Bank Draft, DO NOT Draft My New Location		
Please Initial	<input type="checkbox"/> I Want to Stop/Change/Start Bank Draft Service (include copy of voided check to change or start service)		
	(circle one)		

Section 3: Select Appropriate Gas Rate (please check one)

What Appliances will use Natural Gas? (circle all that apply)	Furnace/Heater	Water Heater	Range	Dryer	Logs	Grill	Lights
<input type="checkbox"/>	Preferred Residential Rate Available to Residential Customers who have a minimum gas consumption of nine (9) therms per month. Residential customers who have monthly gas consumption less than 9 therms per month are also eligible for this rate but will be charged for the minimum consumption amount in any billing period where the minimum consumption is not used. The Preferred Residential Rate is 10% lower than the General Residential Rate on all gas consumed annually. Customers who do not have year-round usage are not eligible for the Preferred Residential Rate.						
<input type="checkbox"/>	General Residential Rate Available to all Residential Customers for all uses.						
I understand that I may change my rate only one time every 12 months.							<input type="text"/>
							Please Initial

Customer Signature

Date

AUTHORITY USE ONLY

Account Number

WO Number

Rate Class

Date

Customer Rep

Deposit

Service Fee

AIC

Total Fees and Deposits

CustomerChange0409