

# GAS SUPPLIER REGISTRATION FORM

TO BALTIMORE GAS AND ELECTRIC COMPANY (BGE):

\_\_\_\_\_ (Supplier)  
hereby applies to deliver natural gas to BGE at BGE's City Gates pursuant to the terms of BGE's GAS SUPPLIER TARIFF for subsequent redelivery to customers of BGE pursuant to the Delivery Service option under one of BGE's Rate Schedules.

## SUPPLIER

(COMPANY) \_\_\_\_\_

(BY) \_\_\_\_\_

(TITLE) \_\_\_\_\_

(DATE) \_\_\_\_\_

(EMAIL ADDRESS) \_\_\_\_\_

### **Supplier Information:**

Indicate participation in Gas Choice Program(s):

Daily-Metered \_\_\_\_\_

BGE Rate Schedules IS and ISS (interruptible)

BGE Rate Schedule C (firm), annual usage greater than 12,000 dth/yr

BGE Rate Schedule C (firm), annual usage between 9,000 dth/yr and 12,000 dth/yr

Daily Requirement Service (DRS) \_\_\_\_\_

Check appropriate DRS Rate Schedules

BGE Rate Schedule D (residential) \_\_\_\_\_

BGE Rate Schedule C (firm), annual usage less than 12,000 dth/yr \_\_\_\_\_

### **FOR DRS PROGRAM ONLY-**

Indicate participation in Utility Consolidated Billing:    Yes \_\_\_\_\_    No \_\_\_\_\_

Indicate all bill options requested:

Rate Ready \_\_\_\_\_    Bill Ready \_\_\_\_\_    Budget Billing \_\_\_\_\_    Dual Billing \_\_\_\_\_

### **Supplier's Address for Customer Contact**

(This information will be posted to BGE's web site.)

Name: \_\_\_\_\_

Address: \_\_\_\_\_

Telephone: \_\_\_\_\_

Website: \_\_\_\_\_

**Supplier's Contact for Collateral**

Name: \_\_\_\_\_

Title: \_\_\_\_\_

Address: \_\_\_\_\_

Telephone: \_\_\_\_\_

Email: \_\_\_\_\_

**Supplier's Billing Address**

Name: \_\_\_\_\_

Contact Name: \_\_\_\_\_

Address: \_\_\_\_\_

Telephone: \_\_\_\_\_

Email: \_\_\_\_\_

***Supplier is to execute this Form and send it to:***

Trina Allen  
Gas Choice Programs Unit  
Baltimore Gas & Electric Co.  
Spring Gardens  
1699 Leadenhall Street  
Baltimore, MD 21230  
410-470-9598  
Email Address: [gaschoiceprogramsunit@bge.com](mailto:gaschoiceprogramsunit@bge.com)