Customer request to change transportation, sales or interruptible rate



Natural gas company (check one):	
☐ Wisconsin Gas LLC	
☐ Wisconsin Electric Gas Operations	
Account name:	
Service address:	
Customer contact name:	
Customer contact phone:Cu	stomer contact email:
Account number:	Meter number:
Current account status: First time changing to new rate? ☐ Yes ☐ No	
Marketer name (if applicable):	
Comment rate calculat	
Current rate schedule:FG Commercial/Industrial Clas	Salas Sarviga (1.9)
Confinercial/industrial clas	s — Sales Service (1-0)
TFCommercial/Industrial Transportation Class – Telemetered Transportation Service (1-8)	
IGCommercial/Industrial InterrOther	• , ,
Other	
Requested rate schedule:	
 FG Commercial/Industrial Class – Sales Service (1-8) TF Commercial/Industrial Transportation Class – Telemetered Transportation 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:
Requested start date for new account status:	
Requested by:	
Customer name (print):	Title:
Customer signature:	
Note: Application must be made in advance of requested start date to ensure all administrative and tariff requirements are met. 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.	