



**APPLICATION FORM FOR NATURAL GAS SUPPLIERS  
INTERESTED IN SERVING INTERRUPTIBLE TRANSPORTATION CUSTOMERS**

PGW is now accepting applications from Natural Gas Suppliers interested in serving the interruptible transportation market in the City of Philadelphia. A successful application will enable a supplier to enroll commercial/industrial daily-metered customers in PGW's service territory.

The applicable Gas Supplier and Gas Service Tariffs are posted on our web site at [www.pgworks.com](http://www.pgworks.com).

In order to serve interruptible transportation customers in PGW's service territory, the City of Philadelphia, suppliers must:

- Obtain any licensing required by the Pennsylvania Public Utility Commission ("PUC")
- Complete and submit the application below and the required, non-refundable \$400 fee.
- Fulfill credit requirements to the sole satisfaction of PGW.
- Sign a Daily Balancing Service Agreement.

For our customers' convenience, all approved suppliers' contact information will be published on our web site. If you do not want your information published, please contact us at [pgwchoicemarketing@pgworks.com](mailto:pgwchoicemarketing@pgworks.com).

Please contact Jamie Slavin, Administrator - Retail Operations, at (215) 684-6248 or at [Jamie.Slavin@pgworks.com](mailto:Jamie.Slavin@pgworks.com) to discuss Daily Balancing Service Agreement and any other questions or concerns with respect to this application.



**PHILADELPHIA GAS WORKS**

800 West Montgomery Avenue • Philadelphia, PA 19122

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**Supplier Application Form – Interruptible  
Transportation**

Contact Name: \_\_\_\_\_  
Title: \_\_\_\_\_  
Company Name: \_\_\_\_\_  
D/B/A Name: \_\_\_\_\_  
Street Address: \_\_\_\_\_  
City: \_\_\_\_\_  
State: \_\_\_\_\_  
Zip: \_\_\_\_\_  
Telephone: \_\_\_\_\_  
Fax: \_\_\_\_\_  
E-mail: \_\_\_\_\_

**Company Marketing Details** (For use on customer bills and PGW's website)

City: \_\_\_\_\_  
State: \_\_\_\_\_  
Zip: \_\_\_\_\_  
Telephone: \_\_\_\_\_  
Fax: \_\_\_\_\_  
E-mail: \_\_\_\_\_  
Website: \_\_\_\_\_

**Emergency Contact Person**

Name: \_\_\_\_\_  
Title: \_\_\_\_\_  
Telephone: \_\_\_\_\_  
Fax: \_\_\_\_\_  
Cellular: \_\_\_\_\_  
E-mail: \_\_\_\_\_

**Contact for Consumer Complaints**

Name: \_\_\_\_\_  
Title: \_\_\_\_\_  
Telephone: \_\_\_\_\_  
Fax: \_\_\_\_\_  
E-mail: \_\_\_\_\_

**Contact for Scheduling and Balancing Issues**

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



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Title: \_\_\_\_\_  
Telephone: \_\_\_\_\_  
Fax: \_\_\_\_\_  
E-mail: \_\_\_\_\_  
Cellular: \_\_\_\_\_

**Accounts Payable Contact**

Name: \_\_\_\_\_  
Telephone: \_\_\_\_\_  
Data Universal Numbering System  
("DUNS") Number \_\_\_\_\_  
Federal EIN: \_\_\_\_\_

**Wire Transfer Instructions**

Bank Name: \_\_\_\_\_  
Contact: \_\_\_\_\_  
Title: \_\_\_\_\_  
Address: \_\_\_\_\_  
City: \_\_\_\_\_  
State: \_\_\_\_\_  
Zip: \_\_\_\_\_  
Telephone: \_\_\_\_\_  
Reference/Account Number: \_\_\_\_\_  
ABA #: \_\_\_\_\_

**Credit References**

*Please provide the three (3) most recent credit references.*

Company Name: \_\_\_\_\_  
Contact: \_\_\_\_\_  
Telephone: \_\_\_\_\_

Company Name: \_\_\_\_\_  
Contact: \_\_\_\_\_  
Telephone: \_\_\_\_\_



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Company Name: \_\_\_\_\_  
Contact: \_\_\_\_\_  
Telephone: \_\_\_\_\_

**Credit Application**

*Supplemental Credit Data to be submitted with application:*

1. Must include a current audited financial statement, annual report, 10-K reports or other filings with regulatory agencies which discuss the supplier's financial status.
2. A list of corporate affiliates, parent companies and subsidiaries, and any available reports from credit reporting and bond rating agencies.
3. Financial data from corporate parent may be acceptable from a supplier in order to satisfy credit worthiness criteria.
4. A non-refundable credit investigation fee of \$400.00 must accompany the application.
5. Mandatory disclosure of prior bankruptcy declarations by Supplier or predecessor Company(s), and parent companies.
6. Supplier hereby consents to performance of credit checks of Supplier and Supplier's parent companies as deemed necessary by PGW.



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**Certificate of Financial Fitness**

I, the undersigned, do hereby certify that I am an officer or duly authorized representative of \_\_\_\_\_, (hereinafter "Pool Operator"), which operates or wishes to operate a pool in Philadelphia Gas Works (hereinafter "PGW") service territory, and do hereby certify the following:

1. Pool Operator is not operating under any chapter of the bankruptcy laws and is not subject to liquidation proceedings under any state law;
2. Pool Operator is not subject to pending or threatened litigation in state, federal or other courts or administrative agency proceedings which could (1) cause a substantial deterioration in its financial condition, (2) cause a condition of insolvency, or (3) endanger its ability to exist as an ongoing business or jeopardize its ability to remain solvent;
3. Pool Operator has the power and authority to transact the gas supplier service in Pennsylvania, has a valid Natural Gas Suppliers' License from the Pennsylvania Public Utility Commission reflecting that it is authorized to operate in PGW's service area, and is in good standing in Pennsylvania;
4. Pool Operator has no delinquent balances outstanding for billings made previously, and Pool Operator has paid its account in the past according to the established terms and not made deductions or withheld payment for claims not authorized;
5. Pool Operator has a continuing obligation to make disclosures under this Certificate and shall notify PGW in writing, within two business days, of the occurrence of any event which would render the Pool Operator unable to meet the conditions of this Certificate set forth, above, and within two business days of any other significant deterioration of its financial fitness or creditworthiness; and
6. Pool Operator hereby agrees to provide PGW a copy of its financial statement, annual report, or Form 10-K for the most recent fiscal year-end; current interim financial statements; a listing of its parent company, affiliates and subsidiaries; any reports from credit reporting and bond rating agencies which are available; and a bank reference and at least two trade references upon request.



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**Release**

The information provided on this form is warranted to be true. The undersigned hereby releases any of the aforementioned references to release data requested by Philadelphia Gas Works (PGW) necessary to perform a credit review.

Company Name \_\_\_\_\_  
Authorized Signature \_\_\_\_\_  
Name and Title \_\_\_\_\_  
Date \_\_\_\_\_

**Please provide the following materials along with your completed application:**

- ☐ Application fee of \$400
- ☐ Financial data as described above
- ☐ Copy of current Supplier License as approved by the Pa PUC

A Daily Balancing Service Agreement will be prepared after the acceptance of the IT application.

**Mail to:**

Jamie Slavin  
Gas Management, 2<sup>nd</sup> Floor  
Philadelphia Gas Works  
800 West Montgomery Avenue  
Philadelphia, PA 19122