



Firm Access Rights (FAR) Assignment Form

A Sempra Energy utility

Customer Name: _____
(Assignor) _____
(Company name)

SoCalGas BAID Account Numbers: _____
(if available) _____

I, Assignor, hereby assign my bidding rights and any resulting Firm Access Rights (“FAR”) to the third party identified below (“Assignee”) as described below.
(Applicable only to Step 2 eligible end-use customers.)

I agree to assign all of my FAR Bidding Rights (“FAR Rights”) for the Open Season Step 2 Bidding process for allocation of firm access rights that will begin on October 1, 2008 to the Assignee. This assignment is for this first Open Season and for the rights conveyed in the first Open Season for its stated three-year period. By assigning my bidding rights, I understand that I am giving up my rights to participate in the Open Season Step 2 rounds of bidding and to any FAR resulting from the bidding. Any FAR obtained through the use of my assigned bidding rights will belong solely to, and be under the control of, the Assignee. This assignment contains no obligation for Assignee to use these rights for my benefit. However, it is my intent that the assignment and any subsequent FAR will be used by the entity designated to supply gas on my behalf. I will clarify with the Assignee the use for my benefit, if any, of the FAR in a separate agreement or understanding. SoCalGas provides no right or remedy for me to re-acquire any rights awarded during the Step 2 process to Assignee. I understand that Assignee must meet all of the terms and conditions for acquiring FAR including contractual and credit obligations to obtain FAR through the Step 2 process.

This assignment may be revoked by Assignor at any time upon written notice to SoCalGas provided it is received by SoCalGas no later than 10 days prior to the beginning of Step 2 of the Open Season by contacting:

Southern California Gas Company
555 West 5th Street
Los Angeles, CA 90013
Attn: Capacity Products, M.L 22E1
FAX No. (213) 244-3897

Assignee (Company Name): _____
By its Authorized Representative: _____
Contact: _____
Phone Number: _____

Assignor (Customer Name): _____
Signature of Authorized Official: _____
Type or Print Name: _____
Title: _____
Date: _____