

SAMPLE FORMS: APPLICATIONS
Set & Turn-On Application, Form 1770-H (6/99)

Sheet 1

T

(TO BE INSERTED BY UTILITY)
ADVICE LETTER NO. 2916
DECISION NO.

ISSUED BY
William L. Reed
Vice President
Chief Regulatory Officer

(TO BE INSERTED BY CAL. PUC)
DATE FILED May 11, 2000
EFFECTIVE Jun 20, 2000
RESOLUTION NO. _____

6375-3588-9306

| | | | | | | | | | | | | | | | | | | | | | | | | |
|---|----------------|----------------|-----------|-----------|-------------------|---------------|-----------------|-----------------|-----|-----------|--------|------------------|---------------|----------------------|-----|----|------------|------------------|--|---------|--|-------------|--|--|
| SET & TURN-ON APPLICATION SOLCAL GAS CO. 1770-H (699) | | | | | | | | | | ADDRESS | | | | | | | | | | NON-RES | | | | |
| CITY | | | | | CONTACT PHONE NO. | | | | | APT. LOC. | | SING. RES. | | TYPE BUS. | | | CROSS ST. | | | SET | | COMPLETE ON | | |
| ISSUED | | | | | DATE | | | | | TIME | | A.M. | | SPECIAL INSTRUCTIONS | | | | | | | | | | |
| PERM. TO ENT. 11 | KEY | EMB | BK.DR | FR.DR | MGR. | APT. | A | B | C | D | E | F | UNK | ON | OFF | ON | NON-PAY ON | SEASONAL BACK-ON | | | | | | |
| NAME | | | | | | | | | | RATE | | BACK ON | NON-PAY ON | SEASONAL BACK-ON | | | | | | | | | | |
| BUSINESS NAME/OF LO | | | | | | | | | | NEW | RESET | H.L. OK | COLL. BILL \$ | COLL'D. | | | | | | | | | | |
| MAILING ADDRESS | | | | | | | | | | SERV. IN | MSA IN | COLL. RECONN. \$ | COLL'D. | | | | | | | | | | | |
| MAILING POST OFFICE | | | | | | | | | | STATE | ZIP | ITO | COLL'D. | | | | | | | | | | | |
| CREDIT CODE | DEP. AMT. \$ | BILL | COLL. | REC. | TRSF. | OVERRIDE CODE | SEC. AMT. \$ | SEC. EXEMPT CD. | ITO | | | | | | | | | | | | | | | |
| PREVIOUS ADDRESS | | | | | | | | | | SERVED | YRS. | MOS. | CLOSE ORDER | | | | | | | | | | | |
| SOC. SEC. NO. | DRV. LIC./ID # | STATE | BIRTHDATE | DAY | YEAR | R | SPOUSE/ROOMMATE | M.I. | | | | | | | | | | | | | | | | |
| LAST NAME | SOC. SEC. NO. | DRV. LIC./ID # | STATE | BIRTHDATE | DAY | YEAR | R | | | | | | | | | | | | | | | | | |

| | | | | | | | | |
|---|---------------------|--------------|---------------------|--------------|--------------------------|-----------------|--------------------|--|
| HOME PHONE NO. | | | BUSINESS PHONE NO. | | | ORDER PLACED BY | | |
| () | | | () | | | EXT. | | |
| INDIVIDUAL | GENERAL PARTNERSHIP | | LIMITED PARTNERSHIP | | CORPORATION | | FRANCHISE | BUSINESS CORPORATION NO. / SOC. SEC. NO. |
| TYPE OF BUSINESS OR PRODUCT MFG'D. | | | | FOOD IND. | OPERATING HOURS PER WEEK | | BUSINESS PHONE NO. | |
| PREVIOUS BUSINESS ADDRESS SERVED | | | | CITY / STATE | | PREVIOUS NAME | | SERVED |
| BANK REFERENCE | BRANCH / ADDRESS | | | CITY | | PHONE NO. | | EXT. |
| CREDIT REFERENCE | ADDRESS | | | CITY | | PHONE NO. | | EXT. |
| PHONE NO. | EXT. | CONTACT | CITY | STATE | ZIP | TITLE | HOME ADDRESS | CITY |
| NAMES - INDIVIDUAL OFFICERS OR PARTNERS | TITLE | HOME ADDRESS | CITY | STATE | ZIP | TITLE | HOME ADDRESS | CITY |
| ORDER PLACED BY | TITLE | HOME ADDRESS | CITY | STATE | ZIP | TITLE | HOME ADDRESS | CITY |