

The fields below are to be completed by the client:

Attn: New Accounts Processing

Fax #: 781-890-4896

THE POWER OF ACTION Application for Gas Service

★Applicant's Name ★Federal Tax ID #	
★Address being applied for: Dunham Ridge, Suite BEVERLY, MA 01915	
★Mailing address, if different from above:	
★Phone Numbers:Phone number at new addressDaytime phone number (in case we new regarding this application) Previous Address:	ed to contact you
★Are you currently or have you recently been a National Grid customer?	If yes, at what address?
★Do you own or rent this property? (circle one) Applicant's Signature: Print Name: I authorize National Grid to bill me for gas service on the date indicate that National Grid requires that any outstanding balances be paid in fagreed upon prior to the acceptance of this application. Customer Service: 800-732-3400	full or arrangements be
The fields below will be completed by Cummings Propert	ies.
Service Start Date Meter Number	
Thank you for transferring the service as soon as possible. If yo at 978-720-4065.	ou have any questions please contact me
Sincerely, Amanda Lipinsky Admin Assistant	