



ACKNOWLEDGEMENT OF SELLER

_____ (“Customer”) a customer of Public Service Electric and Gas Company (“Public Service”) receiving service under Public Service’s TSG-F and/or TSG-NF Rate Schedule(s) under the following account number(s) _____ and meter number(s) _____, hereby acknowledges that it has current, fully executed agreements with the following third-party natural gas seller (“Seller”) to supply natural gas on its behalf and have such natural gas delivered to Public Service.

Seller _____

Effective: (Month, year) _____

Customer further acknowledges that such third-party seller has full authority to act on Customer’s behalf in carrying out all acts necessary for the delivery of Customer’s gas to Public Service including but not limited to (1) aggregating and nominating deliveries to Public Service, (2) assuming responsibility for balancing deliveries and usage, and (3) the payment of any applicable charges pursuant Section 2.6 of the Third Party Supplier Requirements section of Public Service’s Tariff for Gas Service.

Should Customer wish to substitute, limit, modify and/or cancel the authority of the third-party seller so named, Customer must notify Public Service by Facsimile to the following:

PSE&G’s Account Support Fax number (973) 379-7286

Such notification is required prior to the last business day of the month. In the event that notification is received after the next to last business day of the month, such change shall become effective the first day of the second month following notification.

Any substitution, limitation, modification, and/or cancellation of authority hereunder shall be prospective only. Customer shall pay an initial administrative charge of \$106 (including N.J. Sales Use Tax, SUT) upon selection of a seller. For every other seller nominated by Customer during subsequent months, or to return to sales service, Customer shall pay an administrative fee to Public Service of \$106 (including SUT).

By: _____
(Customer)

By: _____
(Seller)

Title: _____

Title: _____

Phone No. _____

Phone No. _____

Date: _____

Date: _____