

Dear Future Iroquois Shipper:

Thank you for your interest in Iroquois Gas Transmission System, L.P. Enclosed for your review are a Service Request Form Fact Sheet, a Service Request Form, a Shipper Credit Form, a Shipper Contact Form, an Iroquois system map, and a current rate summary sheet. It is important to note that there are no costs or other obligations associated with an Interruptible Service Contract (ITS), Park and Loan Service Contract (PALS), Hub Service (HUB) or Blanket Capacity Replacement Contract (BCR) until a shipper actually moves gas on the Iroquois system. Therefore as a potential shipper you may want to consider submitting the required documentation so that the execution of said contracts can be done as soon as possible so that you may be able to immediately transport, park or borrow gas on Iroquois when the opportunity arises.

Consistent with Iroquois' FERC Gas Tariff, a Request for Service must include the following information for credit evaluation:

- a copy of your most recent twelve-month audited financial statement or Annual Report and, if applicable, 10-K form;
- a list of your affiliates, including parents and subsidiaries, if applicable; and
- a completed Shipper Credit Information Form.

Please forward the above information to my attention, along with the completed Service Request Form and Shipper Contact Form so I can expedite same. All financial information will be kept confidential; Iroquois is willing to sign a Confidentiality Agreement if the shipper's company is privately held. If you cannot provide the credit information specified in this section, please provide, if applicable, the requested information for your parent company. You need not provide the information requested in this section if service is prepaid or a letter of credit is posted for an amount equal to the sum of the Transportation Commodity Charge applicable to the proposed transportation service multiplied by the Maximum Equivalent Quantity requested for a three month period. Such letter of credit is to be issued by a commercial bank or financial institution located in the United States or Canada whose long-term unsecured debt securities are rated "A" or better by Standard & Poor's Corporation, "A" or better by Dominion Bond Rating Service or "A2" or better by Moody's Investor Service, Inc.

Iroquois will evaluate the information offered in support of your request for service to determine whether there is adequate capacity to fulfill this request for service and that it is compatible with the operating conditions on Iroquois' system (i.e. validate your request for service). Within thirty days of receiving a valid request for service, Iroquois shall tender a Gas Transportation Contract. If the Gas Transportation Contract is not executed and returned within thirty days, your request for transportation shall be null and void.

The information provided herein is for your benefit and is meant to be in full compliance with the Iroquois FERC Gas Tariff. In the event of a discrepancy between the terms of this letter and Iroquois' FERC Gas Tariff, the terms of the Tariff are controlling.

Should you have any questions, please do not hesitate to contact me at 203-925-7229.

Best Regards,

Lori Gwilliam

Lori Gwilliam
Contracting & Credit Services Representative

REQUESTING TRANSPORTATION SERVICE

There are no costs or other obligations associated with an Interruptible Service Contract (ITS), Park and Loan Service Contract (PALS), Hub Service (HUB) or Blanket Capacity Replacement Contract (BCR) until a shipper actually moves gas on the Iroquois system. A shipper may want to consider executing such contract(s) as soon as possible so that it may immediately be able to transport, park or borrow gas on Iroquois when the opportunity arises.

To sign up for Interruptible or Park and Loan Service, complete a Service Request Form, a Shipper Credit Information Form and a Shipper Contact Form and submit them to Iroquois' Contracting & Credit Services Representative.

Consistent with Iroquois' FERC Gas Tariff, all Service Request Forms must be accompanied by the following information for credit evaluation:

- a copy of the shipper's most recent twelve-month audited financial statement or Annual Report and, if applicable, 10-K form;
- a list of the shipper's affiliates, including parents and subsidiaries, if applicable; and
- a completed Shipper Credit Information Form.

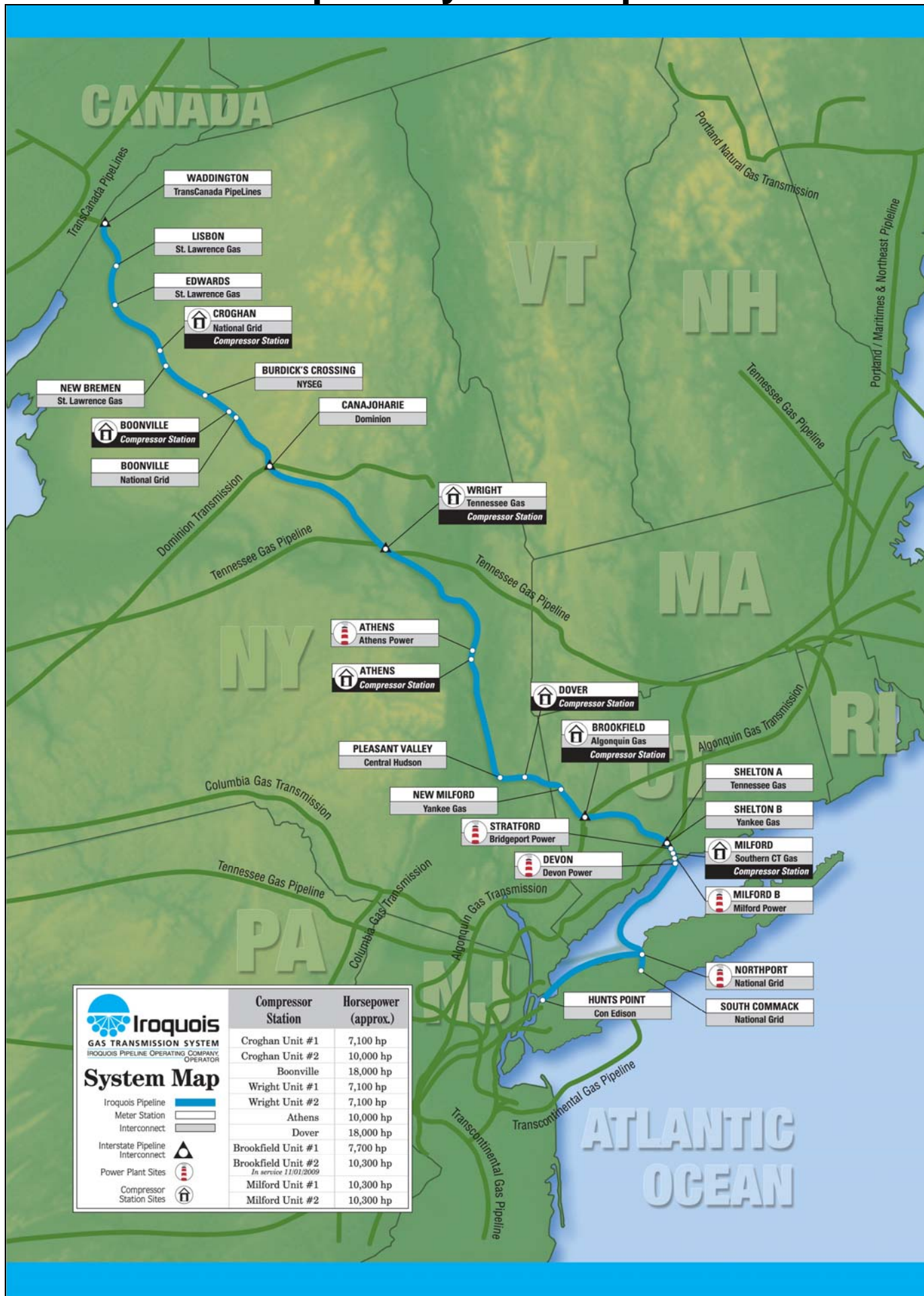
All financial information will be kept confidential; Iroquois is willing to sign a Confidentiality Agreement if the shipper's company is privately held. If the shipper cannot provide the credit information specified in this section, they must provide, if applicable, the requested information for the shipper's parent company. Shippers need not provide the information requested in this section if service is prepaid or a letter of credit is posted for an amount equal to the sum of the Transportation Commodity Charge applicable to the proposed transportation service multiplied by the Maximum Equivalent Quantity requested for a three month period. Such letter of credit is to be issued by a commercial bank or financial institution located in the United States or Canada whose long-term unsecured debt securities are rated "A" or better by Standard & Poor's Corporation, "A" or better by Dominion Bond Rating Service or "A2" or better by Moody's Investor Service, Inc.


Iroquois will evaluate the information offered in support of your request for service to determine whether there is adequate capacity to fulfill this request for service and that it is compatible with the operating conditions on Iroquois' system (i.e. validate the request for service). Within thirty days of receiving a valid request for service, Iroquois shall tender a Gas Transportation Contract. If the Gas Transportation Contract (ITS, PALS, and/or BCR) is not executed and returned within thirty (30) days, the request for transportation shall be null and void.

To sign up for Firm Service, you must first participate in an Open Season and complete an Open Season Bid Form. If, at the time of your written inquiry for Firm Service, there is no Open Season posted, Iroquois will determine whether there is adequate capacity to fulfill the request for service and that it is compatible with the operating conditions on Iroquois' system (i.e. validate the request for service). Iroquois would then post an Open Season for the term and quantity requested. You will still be required to forward financial information for credit evaluation as described above. For further assistance, please contact your Iroquois Account Manager.

If you have any questions or require additional information, please contact:
Lori Gwilliam, Contracting & Credit Services Rep., at 203-925-7229 or via email at lori_gwilliam@iroquois.com

Iroquois System Map





Iroquois
GAS TRANSMISSION SYSTEM
IROQUOIS PIPELINE OPERATING COMPANY, OPERATOR

System Map

- Iroquois Pipeline —
- Meter Station
- Interconnect
- Interstate Pipeline Interconnect
- Power Plant Sites ⚡
- Compressor Station Sites 🏠

Compressor Station	Horsepower (approx.)
Croghan Unit #1	7,100 hp
Croghan Unit #2	10,000 hp
Boonville	18,000 hp
Wright Unit #1	7,100 hp
Wright Unit #2	7,100 hp
Athens	10,000 hp
Dover	18,000 hp
Brookfield Unit #1	7,700 hp
Brookfield Unit #2	10,300 hp
In service 11/01/2009	
Milford Unit #1	10,300 hp
Milford Unit #2	10,300 hp

MARKETING, DEVELOPMENT AND COMMERCIAL OPERATIONS DEPARTMENT CONTACTS

MAILING ADDRESS: IROQUOIS GAS TRANSMISSION SYSTEM, L.P.
ONE CORPORATE DRIVE, SUITE 600
SHELTON, CONNECTICUT 06484

DEPARTMENTAL FAX: 203.925.7296 **GAS CONTROL FAX:** 203.925.1925
GAS CONTROL DIRECT LINE: 1.800.888.3982

Scott E. Rupff, *Vice President, Marketing, Development & Commercial Operations*
Direct Dial: 203.925.7291
E-mail: scott_rupff@iroquois.com

Todd L. White, *Director, Market Development & Customer Service*
Direct Dial: 203.925.7284
E-mail: todd_white@iroquois.com
Function: New Projects

John W. Esposito, *Manager, Commercial Operations & Gas Control*
Direct Dial: 203.944.7028
E-mail: john_esposito@iroquois.com
Function: Commercial Operations & Gas Control

Maria D. Fairfield, *Capacity Marketing & Asset Optimization Manager*
Direct Dial: 203.944.7004
E-mail: maria_fairfield@iroquois.com
Function: Sell daily and term transportation services

Lisa M. Krohne, *Manager Transportation Services*
Direct Dial: 203.925.7283
E-mail: lisa_krohne@iroquois.com
Function: Transportation Services

Lori Gwilliam, *Contracting & Credit Services Representative*
Direct Dial: 203.925.7229
E-mail: lori_gwilliam@iroquois.com
Function: Contract, Credit and Capacity Release

Helena T. Clancy, *Senior Transportation Services Representative*
Direct Dial: 203.944.7047
E-mail: helena_clancy@iroquois.com
Function: Invoicing, Scheduling and Iroquois OnLine Help Desk

Jennifer Erickson, *Transportation Services Representative*
Direct Dial: 203.944.7045
E-mail: jennifer_erickson@iroquois.com
Function: Nomination, Scheduling and Iroquois OnLine Help Desk

SERVICE REQUEST FORM

Any party requesting Gas Transportation Service, Hub Service or Park & Loan Service on Iroquois' system must complete a Service Request Form in keeping with Section 3 of the General Terms and Conditions of Iroquois' currently effective FERC Gas Tariff.

Completed Service Request Forms shall be forwarded to: Lori Gwilliam, Contracting & Credit Service Representative
Iroquois Gas Transmission System, L.P.
c/o Iroquois Pipeline Operating Company
One Corporate Drive, Suite 600
Shelton, Connecticut 06484
E-mail: lori_gwilliam@iroquois.com
Fax: (203) 925-7296

No request for service shall be considered until a completed Service Request Form is received by Transporter.

1. Type of Service Requested (check requested service):

RTS (Firm Service) PALS Potential Capacity Replacement
 ITS HUB Service *(complete only sections 8 through 10 and submit with a Blanket Capacity Release Form)*

2. Rate (applicable to RTS service only):

(a) Percentage of Maximum Rate Shipper is willing to pay _____ %

OR

(b) Negotiated Rate or Rate under Negotiated Rate Formula that Shipper is willing to pay
(Applicable to RTS and ITS service only) _____

3. Date Service is Requested to Commence: _____

4. Date Service is Requested to Terminate: _____

5. Requesting Party (Complete Legal Name): _____

(a) Type of Legal Entity *(corporation, limited partnership, etc)*: _____

(b) State of Incorporation: _____

(c) Shipper is *(please check one)*:

Interstate Pipeline Intrastate Pipeline Marketer LDC
 End-User Producer Broker
 Other _____

(d) DUNS Number *(NAESB Requirement)*: _____

If Shipper is acting as agent in arranging this service, specify below each principal (complete legal name, type of legal entity and state of incorporation) and its respective type of company *(Shipper must supply agency agreements for each principal)*.

SERVICE REQUEST FORM

6. Are additional or new facilities required to be installed or constructed by any party which is necessary for receipt of gas by Iroquois or for delivery to and/or utilization of gas by the Shipper or direct or indirect customers of the Shipper? If so, please specify:

7. Please provide the name and full title of officer (or general partner) of Shipper who will execute service contracts with Iroquois.

8. Contact Person for Service Request Form & Contracts.

Contact Name	Title
Mailing Address	Street Address
Work Phone No.	Fax No.
E-mail	

9. Twenty-four (24) hour contact person for purposes of dispatching gas to and from receipt and delivery points.

Contact Name	Title
Mailing Address	Street Address
Work Phone No.	Fax No.
24-Hour Phone No.	
E-mail	

SERVICE REQUEST FORM

10. Contact person to who invoices and billing notices are to be directed. _____

Contact Name	Title
Mailing Address	Street Address
Work Phone No.	Fax No.
E-mail	

11. Proposed Receipt & Delivery Points and Volumes (*RTS, PALS and ITS Service*)

Check here if FIRM RESERVED TRANSPORTATION SERVICE is requested:

Proposed Receipt Point:	
Proposed Delivery Point:	
Term of Service:	
Maximum Equivalent Quantity, Dth:	

Check here if INTERRUPTIBLE SERVICE is requested at ALL available Receipt & Delivery Points.

Proposed Maximum Equivalent Quantity, Dth: _____

Check here if PARK & LOAN SERVICE is requested at ALL available Receipt & Delivery Points.

Proposed Maximum Balance Quantity, Dth: _____

Check here if HUB SERVICE is requested.

Proposed Maximum Balance Quantity, Dth: _____

SERVICE REQUEST FORM

- 12. Shipper Certification: Shipper hereby certifies that Shipper has title or current contractual right to acquire title to the gas supply for which transportation service is requested, and that Shipper has or will enter into all contractual arrangements necessary to ensure that all upstream and downstream transportation is in place prior to the date on which service is requested to commence.

- 13. This form is provided for the convenience of Shipper in complying with the transportation, hub and park and loan service request procedures of Iroquois' currently effective FERC Gas Tariff. **Nevertheless, it is Shipper's responsibility to provide all of the information necessary to satisfy Transporter.**

Signed: _____

Date: _____

Print Name: _____

Title: _____

Internal Use Only

Date & Time SRF Received: _____

IGTS Representative: _____

Sufficient Data: (Yes/ No)

If NO, data missing: _____

If NO, date letter sent/call made: _____

Follow up comments: _____

SHIPPER CREDIT FORM completed: (Yes/ No)

If NO, data missing: _____

If NO, date letter sent/call made: _____

Follow up comments: _____

SHIPPER CONTACT FORM completed: (Yes/ No)

If NO, data missing: _____

If NO, date letter sent/call made: _____

Follow up comments: _____

Assigned Contract Number(s): _____

SHIPPER CREDIT INFORMATION FORM

PLEASE RETURN THIS FORM WITH AUDITED FINANCIALS TO: Lori Gwilliam, Contracting & Credit Services Rep.
 Phone: 203-925-7229 Fax: 203-925-7296

Financial Year End Occurs on (please enter date): _____

SHIPPER'S INFO	Name	_____	Shipper No.	_____	
	Address	City _____ State _____ Zip _____		DUNS	_____
				Co. Main No.	_____
				Contact Name	_____
	Nature of Business	_____		Fax	_____
	Years of Operation	_____		Moody's or Standard & Poor's Bond Rating (if applicable):	
Legal Entity <i>(LP, LLC, Corp, etc)</i>	_____		_____		

PARENT COMPANY	Parent Company Name	_____	DUNS	_____	
	Parent Company Address	City _____ State _____ Zip _____		Co. Main No.	_____
				Phone	_____
	Contact Name	_____	Fax	_____	

GUARANTOR	Guarantor Name	_____	DUNS	_____	
	Guarantor Address	City _____ State _____ Zip _____		Co. Main No.	_____
				Phone	_____
	Contact Name	_____	Fax	_____	

SHIPPER CREDIT INFORMATION FORM

SUPPLIER OF CREDIT REFERENCES	Supplier Name _____	Supplier Name _____
	Address _____	Address _____
	Supplier Contact _____	Supplier Contact _____
	Phone _____	Phone _____

COGENERATION SHIPPERS	Cogen Purchaser _____	Fuel Supplier _____

Internal Use Only

SHIPPER CREDIT FORM completed: (Yes/ No)

If NO, data missing: _____

If NO, date letter sent/call made: _____

Follow up comments: _____

AUDITED FINANCIALS received: (Yes/ No)

If NO, why: _____

If NO, date letter sent/call made: _____

Follow up comments: _____

SHIPPER CONTACT INFORMATION FORM

PLEASE RETURN TO: **LORI GWILLIAM, CONTRACTING & CREDIT SERVICES REPRESENTATIVE**
IROQUOIS GAS TRANSMISSION SYSTEM, L.P.
☎ **203.925.7229** 📠 **203.925.7296**

SHIPPER'S INFO	Shipper Name: _____	Shipper No. _____
	Address: _____	DUNS: _____

	City _____ State _____ Zip _____	Co. Main No. _____

CONTRACT CONTACT INFO	Contact Name: (for contract inquires) _____	Phone No. _____
	Title: _____	_____
	E-Mail Address: _____	Fax No. _____
	Address: (if different from above) _____	

	City _____ State _____ Zip _____	

CREDIT CONTACT INFO	Contact Name: (for credit inquires) _____	Phone No. _____
	Title: _____	_____
	E-Mail Address: _____	Fax No. _____
	Address: (if different from above) _____	

	City _____ State _____ Zip _____	

BILLING & INVOICE CONTACT INFO	Contact Name: (for billing inquires) _____	Phone No. _____
	Title: _____	_____
	E-Mail Address: _____	Fax No. _____
	Address: (if different from above) _____	

	City _____ State _____ Zip _____	

SHIPPER CONTACT INFORMATION FORM

NOMINATOR INFORMATION IS REQUESTED BUT NOT REQUIRED:

NOMINATOR #1 CONTACT INFO	Contact Name: (for gas scheduling inquires)	_____	Phone No.	_____
	Title:	_____		_____
	E-Mail Address:	_____	Fax No.	_____
	IM Address:	_____		
	Address:	_____	Beeper or Cell No.	_____
		City	State	Zip

NOMINATOR #2 CONTACT INFO	Contact Name: (for gas scheduling inquires)	_____	Phone No.	_____
	Title:	_____		_____
	E-Mail Address:	_____	Fax No.	_____
	IM Address:	_____		
	Address: (if different from above)	_____	Beeper or Cell No.	_____
		City	State	Zip

TRADER/MARKETER INFORMATION IS REQUESTED BUT NOT REQUIRED:

Trader/Marketer CONTACT INFO	Contact Name: (for gas scheduling inquires)	_____	Phone No.	_____
	Title:	_____		_____
	E-Mail Address:	_____	Fax No.	_____
	IM Address:	_____		
	Address: (if different from above)	_____	Beeper or Cell No.	_____
		City	State	Zip

SHIPPER'S AGENT FORM

This form must be completed and signed by both the Shipper and the Agent to be valid. Form must be received at least one (1) business day prior to the day on which the agent is to begin nominating.

SHIPPER: Complete form, sign and fax to Agent
AGENT: Sign and fax to: a.) Shipper; and
 b.) Lori Gwilliam, Iroquois Gas at Fax No. (203) 925-7296

SHIPPER COMPANY INFORMATION		SAN _____
Legal Name _____		DUNS _____
Contact		Phone _____
		Fax _____
E-Mail _____		24 Hour Contact Information
		Contact _____
		Phone _____
Billing goes to	<input type="radio"/> Shipper <input type="radio"/> Agent (to review only, Shipper to pay) <input type="radio"/> Agent (to pay)	
Billing Address		Agent Start Date: _____
		Agent End Date: _____
Agent Parameters	<input type="radio"/> Nominations <input type="radio"/> Confirmations (meter operators only) <input type="radio"/> Flowing Gas (meter operators only)	
	<input type="radio"/> Capacity Release <input type="radio"/> Invoicing <input type="radio"/> Reporting	
<input type="radio"/> Appoint Agent outlined below		
<input type="radio"/> Terminate Agent/No New Agent		
<input type="radio"/> Other _____	_____	_____
	Shipper Signature	Date

AGENT INFORMATION		Agent SAN _____
Legal Name _____		DUNS _____
Contact		Phone _____
		Fax _____
E-Mail _____		24 Hour Contact Information
		Contact _____
		Phone _____
Agent status recallable in writing with 48 hours notice by Shipper		
<i>Agent status begins</i> _____	_____	_____
<i>and</i> _____	Agent Signature	Date
<i>ends</i> _____		

IGTS USE ONLY		
Contract Administration	ACES/IOL	JD Edwards

BLANKET CAPACITY RELEASE – FACT SHEET

HOW THE BLANKET CAPACITY RELEASE PROCESS WORKS:

- 1) Releasing Shippers will post available capacity on Iroquois OnLine (IOL). Anyone with access to IOL will be able to read the notices of available capacity. **HOWEVER, ONLY THOSE SHIPPERS WHO HAVE:**

- a fully executed Blanket Gas Transportation Contract for Firm Reserved Service with Replacement Shipper; **AND**
- appropriate Financial Assurances in place, **AND**
- accepted the Iroquois OnLine site license agreement.

will be able to successfully bid on released capacity. NO EXCEPTIONS.

- 2) All bids are binding. Once bidding closes, both the Releasing Shipper and the winning bidder will be able to print from Iroquois OnLine a Capacity Release Offer Report (CROR). The CROR will list all details of the Capacity Release such as - Releasing Shipper, Replacement Shipper, volumes, rate, recall ability, etc.
- 3) DUNS Numbers are mandatory for capacity release, which will be done via IOL. Please call Lori Gwilliam, Contracting & Credit Services Representative, at 203-925-7229 or email her at lori_gwilliam@iroquois.com, if you have any questions regarding your DUNS number, including whether you currently have one listed with us from previous solicitations.

CURRENT FIRM SHIPPERS

- Fax a completed Blanket Capacity Release Form to Lori Gwilliam, Contracting & Credit Services Representative at fax no. 203-925-7296. Be sure to keep a copy.
- Execute and return Blanket Capacity Release Agreement within 5 days of receipt.
- Contact Lori Gwilliam, Contracting & Credit Services Representative, or email her at lori_gwilliam@iroquois.com if you need assistance with Iroquois OnLine access.

POTENTIAL REPLACEMENT SHIPPERS (AKA “APPROVED BIDDERS”)

- Fax a completed Blanket Capacity Release Form to Lori Gwilliam, Contracting & Credit Services Representative at fax no. 203-925-7296. Be sure to keep a copy.
- **IF** at this time you are **not** a Shipper on Iroquois (RTS, ITS or PALS), you must also complete Sections 8 through 10 of Iroquois’ Service Request Form, found beginning on Sheet No. 181 of Iroquois’ FERC Tariff or on Iroquois’ website. Please call Lori Gwilliam, Contracting & Credit Services Representative, at 203-925-7229 if you have any questions regarding the necessary forms.
- Supply appropriate Credit information for review:
 - a copy of your most recent twelve-month audited Financial Statement or Annual Report and, if applicable, 10-K Form;
 - a list of your affiliates, including parents and subsidiaries, if applicable;
 - a completed Shipper Credit Information Form found on Iroquois’ website;
 - a completed Shipper Contact Information Form found on Iroquois’ website; and
 - DUNS number (NAESB requirement).
- Execute and return Blanket Gas Transportation Contract for Firm Reserved Service with Replacement Shipper within 5 days of receipt.
- Contact Lori Gwilliam, Contracting & Credit Services Representative, at 203-925-7229 or email her at lori_gwilliam@iroquois.com, if you need assistance with Iroquois OnLine access.

BLANKET CAPACITY RELEASE FORM

Please forward your completed form to:

Lori Gwilliam, Contracting & Credit Services Representative
Iroquois Gas Transmission System, L.P.
One Corporate Drive, Suite 600, Shelton, Connecticut 06484
Fax: (203) 925-7296; Email: lori_gwilliam@iroquois.com

No request for service shall be considered until a completed Blanket Capacity Release Form and appropriate credit information, including a completed Shipper Credit Form and DUNS number, are received by Transporter.

REPLACEMENT SHIPPERS ONLY:

Shipper Full Legal Name: _____

DUNS Number for the entity listed*: _____

Type of Legal Entity: _____
(i.e. corporation, limited partnership, LLC, etc.)

State of Incorporation: _____

*If at this time you are not a Shipper on Iroquois, you **must** also complete Sections 8-10 of Iroquois' Service Request Form (Sheet No. 181 of our Tariff or on our website at <http://www.iroquois.com>).*

RELEASING SHIPPERS ONLY (RTS Firm Shippers Only):

Shipper Full Legal Name: _____

DUNS Number for the entity listed*: _____

Current Contract Number(s): _____

ALL SHIPPERS:

Name and full title of officer (or general partner) of Shipper who will execute service agreement with Iroquois: _____

Contact Person for this request: _____

Phone _____ Fax _____ Email _____

Shipper Certification: Shipper hereby certifies that Shipper or direct or indirect customers of Shipper has title or current contractual right to acquire title to the gas supply for which transportation service is requested, and that Shipper has or will enter into all contractual arrangements necessary to ensure that all upstream and downstream transportation is in place prior to the date on which service is requested to commence.

This form is provided for the convenience of the Shipper in complying with the transportation request procedures of Transporter's currently effective FERC Gas Tariff. Nevertheless, it is Shipper's responsibility to provide all of the information necessary to satisfy Transporter.

Signed _____ Date _____

Print Name _____ Title _____

**DUNS Numbers are mandatory for capacity release, which will be done via Iroquois OnLine. Please call Lori Gwilliam, Contracting & Credit Services Representative, at 203-925-7229, or email her at lori_gwilliam@iroquois.com, if you do not have an IOL account on Iroquois, or if you have any questions regarding your DUNS number, including whether you currently have one listed with us from previous solicitations.*

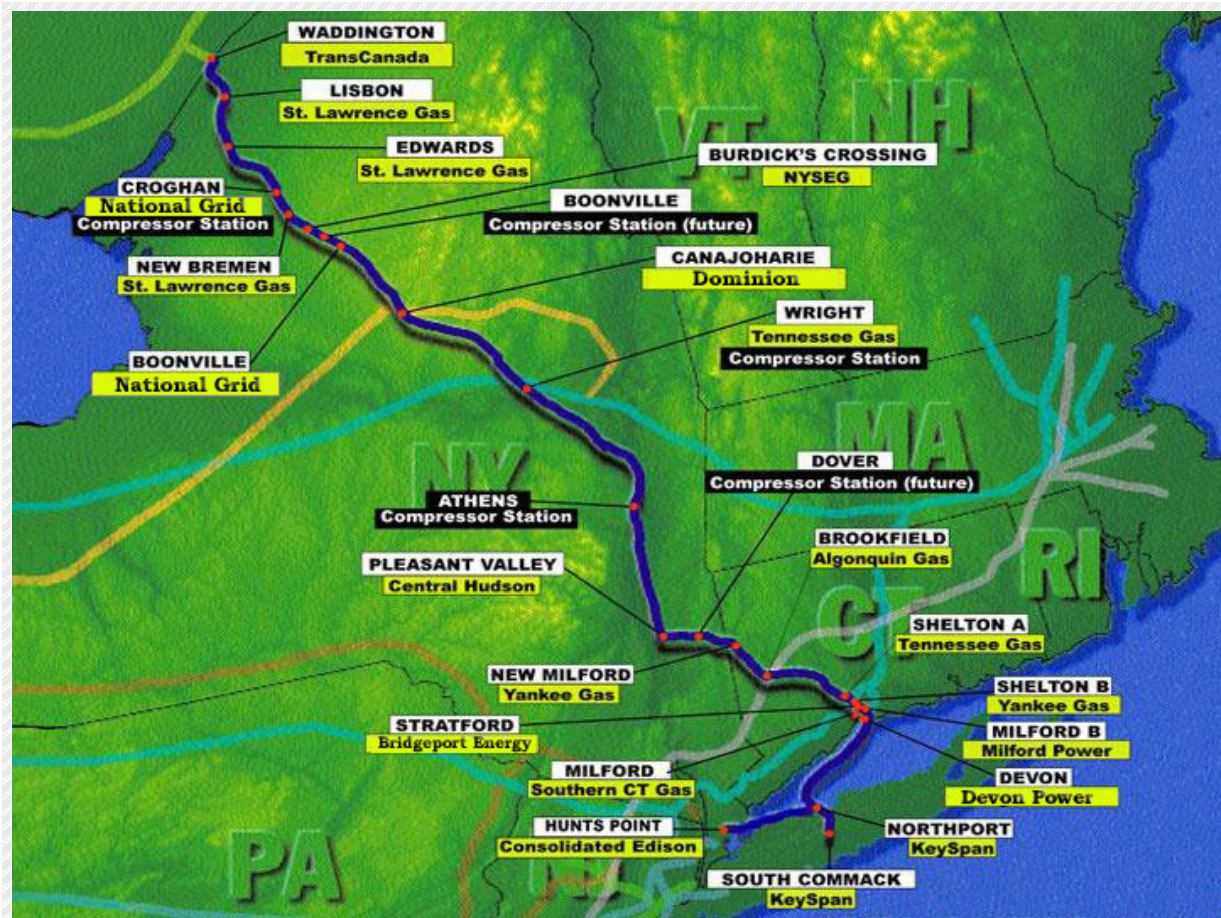
HUB SERVICE

Iroquois offers a service referred to as our “HUB” Service, which combines the benefits of Park and Loan Service (“PALS”) with Interruptible Transportation Service (“ITS”). The supply being utilized to provide this service is sourced from Iroquois’ line pack and it delivered using ITS transportation.

Hub Service combines Interruptible Transportation Service and Park and Loan Service into a single service which means only one nomination. Parks (Loan Paybacks) and/or Loans are available at Waddington only. Hub Service is offered on an as “available basis”. The Hub Service has a higher priority than Park and Loan Service and an equal priority with ITS. Commodity charges (which include the injection and withdrawal charges) can be less than firm and there are no demand charges with this service.

Below is a snapshot of the Hub Service, which became available on November 1, 2006.

- Combines Interruptible Transportation Service (“ITS”) and Park and Loan Services (“PALS”) into a single service.
- Parks (Loan Paybacks) and/or Loans are available at Waddington only.
- HUB Transportation service is offered on an “as available” basis.
- Higher priority than PALS; Equal priority with ITS.
- Nomination process is simplified to one nomination.
- Commodity charges can be less than firm and there are no demand charges with this service.



HUB SERVICE

HUB Service Commodity Rates:	Maximum Rate, Effective 1/1/2008
Zone 1 (Waddington to Wright)	\$0.2239
Inter-Zone (Waddington to South Commack and any points south of Wright)	\$0.3740
Eastchester (Waddington to Hunts Point)	\$0.6390

HUB Service Daily Balance Rates:	
Minimum	\$ 0.0000
Maximum	\$ 0.0154

To sign up for the Hub Service:

- Simply complete and fax a Service Request Form to Lori Gwilliam, Contracting & Credit Services Representative at fax no. 203.925.7296.
- Execute and return a Hub Service Contract within 30 days of receipt.
- If you have any questions regarding the HUB service, please contact Maria Fairfield, Capacity Marketing & Optimization Manager at 203.944.7004 or via email at maria_fairfield@iroquois.com

OPEN SEASON BID FORM

**Please return completed
and signed bid form to:**

Lori Gwilliam, Contracting & Credit Services
Representative Iroquois Gas Transmission System, L.P.
One Corporate Drive, Suite 600
Shelton, CT 06484
Telephone: (203) 925-7229
Fax: (203) 925-7296

SHIPPER INFORMATION

Shipper Name: _____
Shipper Address: _____

Contact Person: _____
Telephone: _____
Fax: _____
E-Mail: _____
Type of Shipper: _____
(end user, marketer, LDC, producer, etc.)

FIRM TRANSPORTATION SERVICE REQUESTED

Open Season Notice Identifier #: _____
Daily Contract Quantity (Dth/d) (exclusive of fuel): _____
Receipt Point: _____ **Delivery Point:** _____
Start Date: _____ **End Date:** _____
Demand Rate Bid (\$US/Dth) over entire term of service: _____

1. All bids are binding. This form must be filled out in its entirety. Iroquois is not responsible for late, lost or misdirected bids.
2. Shipper Certification: Shipper hereby certifies that Shipper has title or current contractual right to acquire title to the gas supply for which transportation service is requested, and that Shipper has or will enter into all contractual arrangements necessary to ensure that all upstream and downstream transportation is in place prior to the date on which service is requested to commence.
3. This form is provided for the convenience of Shipper in complying with the transportation service request procedures of Transporter's currently effective FERC Gas Tariff. Nevertheless, it is Shipper's responsibility to provide all of the information necessary to satisfy Transporter.

Signed: _____ Date: _____

Print Name: _____ Title: _____