

SELLER DOCKET NO. GR-_____
PURCHASER DOCKET NO. GR-_____
FILING FEE RECEIVED _____

BEFORE THE NORTH CAROLINA UTILITIES COMMISSION

APPLICATION FOR TRANSFER OF AUTHORITY TO RESELL NATURAL GAS SERVICE FOR LEASED PREMISES

INSTRUCTIONS

If additional space is needed, supplementary sheets may be attached. If any section does not apply, write "not applicable".

SELLER

1. Name of current certified owner: _____
2. Mailing address: _____
3. Business telephone number: _____

PURCHASER ("Applicant")

4. Name of purchaser: _____
5. Business mailing address of purchaser: _____
City and state: _____ Zip code: _____
6. Business telephone number: _____ Business fax number: _____
7. Business email address: _____

UTILITY SERVICE AREA

8. Street Address of Leased Premises: _____
9. Name of Leased Premises: _____
10. County (or counties): _____
11. Supplier of natural gas _____

RESALE PROVISIONS

12. Describe the method Applicant proposes to use to allocate the supplier's individual natural gas bill for a unit among all the lessees in the unit (NCUC Rule R24-5): _____
13. Monthly administrative fee per bill: _____
(Pursuant to NCUC R24-5(d), no more than \$3.75 per month, the maximum amount authorized for water resellers by Commission Rule R18-6, may be added as an administrative fee to the cost of natural gas service. The amount of the administrative fee, up to the maximum amount, should be justified by Applicant's actual costs.)
14. Bills will be past due _____ days after they are mailed or otherwise delivered to lessees. (NCUC Rule R24-7(e) specifies that bills shall not be past due less than twenty-five (25) days after mailing or other delivery to lessees.)
15. Late fee amount: _____
(Pursuant to NCUC Rule R24-5(d) and (e), no more than 1% per month on the balance in arrears may be assessed.)

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16. Returned check charge: _____
(Pursuant to NCUC Rule R24-5 and G.S. 25-3-506, no more than \$25.00.)
17. Statement of Applicant's plans for retention and availability of records (see NCUC Rule R24-6(a) and (b)):

PERSONS TO CONTACT

	<u>NAME</u>	<u>ADDRESS</u>	<u>TELEPHONE</u>
18. Management:	_____	_____	_____

		Email _____	
19. Complaints or Billing:	_____	_____	_____

		Email _____	
20. Emergency Service:	_____	_____	_____

		Email _____	
21. Filing and Payment of Regulatory Fees to NCUC:	_____	_____	_____

		Email _____	

OTHER PROVISIONS

22. Applicant must notify the Commission in writing within 30 days following the change of any information supplied on this form.
23. Applicant must also file quarterly Regulatory Fee Reports and make regulatory fee payments. Details are set out in NCUC Rule R15-1.

REQUIRED EXHIBITS

24. If the Purchaser is a corporation, LLC, LP, etc., enclose a copy of the certification from the North Carolina Secretary of State (Articles of Incorporation or Application for Certificate of Authority for Limited Liability Company, etc.). **(Must match name on Line 4 of application.)**
25. If the Purchaser is a partnership, enclose a copy of the partnership agreement. **(Must match name on Line 4 of application.)**
26. Enclose a copy of a Warranty Deed showing that the Purchaser has ownership of all the property necessary to operate the utility. **(Must match name on Line 4 of application.)**
27. Enclose a vicinity map showing the location of the leased premises in sufficient detail for someone not familiar with the county to locate the leased premises. (A county roadmap with the leased premises outlined is suggested.)
28. Enclose a copy of the supplier's schedule of rates that will be charged to the Applicant for natural gas.
29. Enclose a copy of any agreements or contracts that the Applicant has entered into covering the provision of billing and collections services to the leased premises.
30. Indicate the number of apartment buildings, residential buildings, or single-family dwellings to be served, the number of units in each apartment building or residential building and the number of bedrooms in each unit.
31. Enclose a copy of the template or form used for billing statements.

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32. Enclose a copy of all forms used for the lease to lessees, including a statement of which parts of the lease relate to billing for natural gas service.

FILING INSTRUCTIONS

33. Electronic filing is available at www.ncuc.net for application submittal or mail one (1) original application with required exhibits and original **notarized signature**, plus three (3) additional collated copies to:

<u>USPS Address:</u>	OR	<u>Overnight Delivery at Street Address:</u>
Chief Clerk's Office		Chief Clerk's Office
North Carolina Utilities Commission		North Carolina Utilities Commission
4325 Mail Service Center		430 North Salisbury Street
Raleigh, North Carolina 27699-4300		Raleigh, NC 27603-5918

34. Enclose a filing fee as required by G.S. 62-300. A Class A utility (annual natural gas reseller revenues of \$1,000,000 or more) requires a \$250 filing fee. A Class B utility (annual natural gas reseller revenues between \$200,000 and \$1,000,000) requires a \$100 filing fee. A Class C utility (annual natural gas reseller revenues less than \$200,000) requires a \$25 filing fee. **MAKE CHECK PAYABLE TO N.C. DEPT. OF COMMERCE/UTILITIES COMMISSION.**

35. This application may be filed before title to the property passes to the new purchaser. In that event, the deed required in Item 26 above shall be filed with the Commission as a follow-up to the initial transfer application once the deed has been executed and recorded with the Register of Deeds. The Commission may approve the transfer application on the condition that it is not effective until the deed is executed, recorded, and has been filed with the Commission.

SIGNATURES

36. Application shall be signed by an authorized representative of the seller.

Signature: _____
 Printed Name: _____
 Title: _____
 Date: _____

37. Application shall be signed and verified by an authorized representative of the purchaser.

Signature: _____
 Printed Name: _____
 Title: _____
 Date: _____

38. (Typed or printed name of the purchaser's representative) _____, personally appearing before me and, being first duly sworn, says that the information contained in this application and in the exhibits attached hereto is true to the best of his/her knowledge and belief.

This the _____ day of _____, 20____

Signature of Notary Public

Name of Notary public – Typed or printed

My Commission Expires: _____

Date

(NOTARY SEAL)