



If you need to add meter(s) or additional appliances you must also complete a Gas Service Application.

www.peoples-gas.com/gasapp

PO Box 535323
Pittsburgh, PA 15253
www.peoples-gas.com

For Office Use Only	
Account Number	Effective Date
<input type="text"/>	<input type="text"/>

Commercial Credit Application				*Indicates required field	
*Service Address	*City	*State	*Zip		
*Mailing Address	*City	*State	*Zip		
*Name of person or business responsible for this bill (Applicant)					
Name under which the business is/will be operated (if different)					
*Description of Business	State License Number (if applicable)		Tax Exempt Yes No (if yes, attach copy of certificate)		
D-U-N-S Number	D&B Rating	Email Address			
Is there any other business or apartment served by this business? If yes, circle appropriate option					
Other business		My home		Other residential tenant's apartment	

Type of Business/Organization (check one and complete required information)							
Individual/Sole Proprietor							
Name	Residential Address (street)	City	State	Zip	Telephone	Type	
Social Security Number							
Partnership		Date Formed / /		Tax I.D. Number			
Name of General Partner	Residential Address (street)	City	State	Zip	Telephone	Type	
Social Security Number							
Name of General Partner	Residential Address (street)	City	State	Zip	Telephone	Type	
Social Security Number							
Corporation		Date of Incorporation		Tax ID Number			
Name of President/CEO	Residential Address (street)	City	State	Zip	Telephone	Type	
Other							
Contact Name	Residential Address (street)	City	State	Zip	Telephone	Type	

Parent Company Information	Not Applicable					
Name	Address	City	State	Zip	D&B Number	
Will parent guarantee payment and/or performance						
		Yes	No			

New Customer	Yes	No	(if no, list other business/branch served by Peoples Gas)				
Name	Address	City	State	Zip	Account Number		
Bank References							
Bank Name	Address	City	State	Zip			
Contact Name	Phone			Fax			

The person affixing his/her signature below certifies that he or she has the authority to complete this Application and apply for credit on behalf of the Applicant. Applicant hereby: (i) represents and warrants that the information supplied herein is accurate and complete to the best of its knowledge and belief. (ii) certifies that this credit application is for commercial credit and not for personal, family or household purposes (iii) authorizes its financial institutions and trade partners to release its credit information to Peoples (iv) authorizes Peoples to check credit information in connection with this Application, including, without limitation, ordering credit reports (v) authorizes Peoples to recover all costs associated with the collection of debts from Applicant including, without limitation, attorneys' fees and collection agency fees, and (vi) authorizes Peoples to share credit information with its subsidiaries and affiliates (to the extent not otherwise restricted by applicable laws and regulations).

*Name *Signature *Date



PAYMENT GUARANTY

THIS PAYMENT GUARANTY ("Guaranty") is made effective as of _____, and is entered into by _____ ("Guarantor"), in favor and for the benefit of Peoples Gas Company ("Payee").

RECITALS

Pursuant to the execution of a Commercial Natural Gas Service Application by _____ ("Customer"), dated _____ to supply commercial natural gas to _____ ("Property"). It is a condition precedent to Payee's obligations to supply commercial natural gas to the Property that Guarantor shall execute and deliver to Payee a satisfactory payment guaranty of Customer's obligations under the Commercial Natural Gas Service Application. NOW, THEREFORE, in consideration of and in order to induce Payee to provide Commercial Natural Gas Service to Customer, which service the Guarantor hereby agrees shall benefit the Guarantor, the Guarantor executes and delivers this Guaranty for the benefit of the Payee.

AGREEMENTS

- 1. DEFINITIONS. As used in this Guaranty, the terms set forth below shall, unless the context otherwise requires, have the following meanings:
a. "Payment Guaranty" and "Guaranty" shall mean this Guaranty, as it may be amended, modified, extended, renewed, restated, and supplemented from time to time.
b. "Commercial Natural Gas Service" shall mean the sale, supply, delivery, and service thereof of commercial natural gas from Payee to Customer at the identified Property.
c. "Accounts Receivable" shall mean the liabilities incurred by the Customer and payable to the Payee for the sale, supply, delivery, and service of commercial natural gas to the service property, including all applicable fees, taxes, and late payment charges accruing interest at the tariff rate.
2. PAYMENT GUARANTY. Guarantor hereby irrevocably, absolutely, and unconditionally guarantees to Payee the full and prompt payment and performance of any and all Accounts Receivable charges by Customer incurred to Payee, including any costs of collection thereof including, but not limited to, all reasonable attorneys' fees and legal costs.
3. WAIVER. Guarantor hereby waives any and all guaranty defenses, including but not limited to, exoneration, all subrogation rights until Payee is paid in full, any changes or assignments in the obligation and/or security by Payee, the benefit of any applicable statute of limitations, all notices of sale, notice of default, presentment for payment, demand, notice of non-payment, protest and notice of protest, and notice of acceptance of this Guaranty by Payee.
4. CONSENT. Guarantor hereby agrees that Payee may from time to time, without notice to Guarantor, which notice is hereby waived by Guarantor, extend, waive, renew, transfer, settle, or compromise the Accounts Receivable, in whole or in part, without releasing, extinguishing or affecting in any manner what so ever the liability of Guarantor hereunder, the foregoing acts being hereby consented to by Guarantor.
5. TERM. Guarantor hereby agrees that this Guaranty shall remain in full force and effect and be binding upon Guarantor until the Accounts Receivable are paid and performed in full.
6. TERMINATION. Guarantor may terminate this Guaranty at any time, but shall remain liable for the then-existing balance of the Accounts Receivable of Customer. Written notice of termination of this Guaranty by Guarantor must be sent by certified or registered mail to: Credit Department, 375 North Shore Dr, Pittsburgh, PA 15212.
7. GUARANTY ABSOLUTE. Guarantor hereby agrees that the obligations of Guarantor hereunder are absolute and independent and shall not be affected by any voluntary or involuntary reorganization, liquidation, dissolution, receivership, insolvency, bankruptcy, or other similar proceedings affecting the Customer.
8. SUCCESSORS AND ASSIGNS. Guarantor hereby agrees that this Guaranty shall not be assignable by Guarantor and shall be binding upon the legal representatives and successors of Guarantor. This Guaranty shall apply to and inure to the benefit of Payee and its successors, assigns, and legal representatives.
9. CONSTRUCTION. Guarantor hereby agrees that this Guaranty and all related documents shall be deemed to be contracts made and delivered in the Commonwealth of Pennsylvania, and shall be governed, construed, and enforced under the laws of the Commonwealth of Pennsylvania without regard to conflicts of laws principles.
10. VENUE. Guarantor hereby agrees that the site of venue for litigation concerning this Guaranty is in Allegheny County, Pennsylvania.
11. SEVERABILITY. Guarantor hereby agrees that if any provision of this Guaranty shall be held or deemed to be, or shall in fact be, illegal, inoperative, or unenforceable, the same shall not affect any other provision or provisions herein contained or render the same invalid, inoperative or unenforceable to any extent whatsoever.
12. AMENDMENTS. Guarantor hereby agrees that this Guaranty shall not be modified or amended except by a written agreement duly executed by Payee and Guarantor or their successors or assigns; provided, however, Guarantor may not assign its obligations as contained in this Guaranty.

IN WITNESS WHEREOF, Guarantor has executed and delivered this Guaranty as of the date first written above. I have read, understand, and acknowledge the above Guaranty.

Signature of Guarantor

Print Name

Residential Address (NOT SERVICE ADDRESS)

STATE OF

COUNTY OF

Commercial Natural Gas Service Application Instructions



PO Box 53523
Pittsburgh, PA 15253
www.peoples-gas.com

For Office Use Only	
Account Number	Effective Date

Commercial Natural Gas Service Application				*Indicates required field
*Service Address 1	*City	*State	*Zip	
*Mailing Address 2	*City	*State	*Zip	
*Name of person or business responsible for this bill (Applicant) 3				
Name under which the business is/will be operated (if different) 4				
*Description of Business 5	State License Number (if applicable) 6	Tax Exempt 7 Yes No (if yes, attach copy of certificate)		
D-U-N-S Number 8	D&B Rating 9	Email Address 10		
Is there any other business or apartment served by this business? If yes, circle appropriate option 11				
<input type="checkbox"/> Other business <input type="checkbox"/> My home <input type="checkbox"/> Other residential tenant's apartment				

Type of Business/Organization (check one and complete required information)					
Individual/Sole Proprietor					
Name	Residential Address (street)	City	State	Zip	Telephone
Social Security Number					
Partnership					
Date Formed / /	Residential Address (street)		City	State	Zip
Tax I.D. Number					
Social Security Number					
Name of General Partner	Residential Address (street)	City	State	Zip	Telephone
Social Security Number					
Corporation					
Date of Incorporation	Residential Address (street)		City	State	Zip
Tax ID Number					
Social Security Number					
Name of President/CEO	Residential Address (street)	City	State	Zip	Telephone
Other					
Contact Name	Residential Address (street)	City	State	Zip	Telephone

Parent Company Information					
Name	Address	City	State	Zip	D&B Number
Will parent guarantee payment and/or performance Yes No					

New Customer						
Yes	No	(if no, list other business/branch served by Peoples Gas)				
Name	Address	City	State	Zip	Account Number	

Bank References					
Bank Name	Address	City	State	Zip	
Contact Name		Phone		Fax	

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*Name _____ *Signature _____ *Date _____

For information on how to remit payment of the security deposit that may have been requested, please visit

www.peoples-gas.com

If a security deposit was requested, we will not process this application until payment confirmation has been provided.

Submit completed application and payment guaranty

E-Mail CustomerCarePeoples@peoples-gas.com

Or Fax 1-855-269-0090

Or Mail Peoples Gas
Attn: Credit Department
PO Box 535323
Pittsburgh, PA 15253-5323

IMPORTANT INFORMATION ABOUT GUARANTORS: An individual/corporate entity cannot serve as their own guarantor.

- SERVICE ADDRESS**
Building number, street name, city, state and zip code of the location where service is to be used, per Peoples records
- MAILING ADDRESS**
Complete if the bills are to be mailed to an address that is different than the service address.
- NAME OF PERSON OR BUSINESS RESPONSIBLE FOR THIS BILL**
The correct legal name of the person, partnership, corporation or other organization responsible for paying Peoples Gas Company for all services provided to this service address. **THIS IS THE NAME THAT WILL APPEAR ON THE ACCOUNT.**
- NAME UNDER WHICH THE BUSINESS WILL BE OPERATED**
This is the business' trade name. If John Smith, a sole proprietor, calls his restaurant "Sub-Station", John Smith would be printed in Item 3. "Sub-Station" would be printed in Item 4.
- DESCRIPTION OF BUSINESS**
Print the primary business operation for this account at this premise (ex: Bar, Insurance Agency, etc.)
- STATE LICENSE NUMBER**
If this business has a state license (ex: LCB License), print the number in the proper space, if known.
- TAX EXEMPT STATUS**
Check yes or no as appropriate. If yes, please attach a copy of your tax exemption certificate.
- D-U-N-S NUMBER**
Enter your Dun & Bradstreet number, if known
- D&B RATING**
Enter your Dun & Bradstreet rating, if known
- EMAIL ADDRESS**
Enter your email address.
- OTHER BUSINESS SERVED BY THIS METER?**
Check the appropriate box, if applicable
- TYPE OF ORGANIZATION**
The following questions define the legal structure of the business. Check the applicable category box and complete all information requested for:
 - Individual/Sole Proprietorship** – A business owned by one person who is responsible for its debts. The business is not incorporated.
 - Partnership** – A business owned by more than one individual or business. Each of the general partners is responsible for its debt. Use the reverse side of the application or attach additional sheets if needed.
 - Corporation** – A business that has a legal existence separate from its owner or owners. A corporation must have appropriate documents on file with the Pennsylvania Secretary of State. This includes non-profit corporations.
 - Other** – This category includes all other types of organizations. Examples would include Political Organizations, Foundations, Governmental Units and Unincorporated Associations (e.g. Unions).
- PARENT COMPANY INFORMATION**
If the entity listed as the "Name under Which the Business Will Be operated" (Item 4) is a subsidiary of another company (The Parent Company), enter the information as requested pertaining to the parent company. Otherwise, check the box "Not Applicable".
- NEW CUSTOMER**
If the entity listed as the "Name under Which the Business Will Be operated" (Item 4) does not currently have service with Peoples, check yes. If the entity listed as the "Name under Which the Business Will Be Operated" currently does have service with Peoples, enter the appropriate information.
- BANK REFERENCES**
Enter the information requested as it pertains to your primary banking institution. This document must be signed by the business owner or other individual to sign on behalf of the business. Print the full name of the individual signing along with the date in the proper space, then sign the document.
- SIGNATURE LINE**
This document must be signed by the business owner or other individual to sign on behalf of the business. Print the full name of the individual signing along with the date in the proper space, then sign the document.