

ENABLE MISSISSIPPI RIVER TRANSMISSION, LLC

FORM OF REQUEST FOR SERVICE

SEND TO: Enable Mississippi River Transmission, LLC ("MRT")
14805 North Outer 40 Road, Suite 230
Chesterfield, MO 63028-6060 OR Fax: (314) 991-7600

NEW SERVICE:

____ FTS ____ ITS
____ FSS ____ SCT
____ NNT* ____ ISS
____ PALS

AMENDMENT TO EXISTING CONTRACT:

CONTRACT DATE _____
CONTRACT NO. _____

**IS REQUEST FOR CHANGE IN PRIMARY RECEIPT OR
DELIVERY POINT (S) BEING MADE BY A
REPLACEMENT CUSTOMER? YES ____ NO ____
IF YES, PRIMARY RELEASING CUSTOMER MUST ALSO
EXECUTE REQUEST.**

*NNT available only to Customers with Rate Schedules FTS and FSS service.

INFORMATION REQUIRED FOR VALID TRANSPORTATION REQUEST

I. CUSTOMER INFORMATION AND NOTICES

CUSTOMER

Company Name

Address

City State Zip Code

Phone / Fax

DUNS #

Office Name and Title (Signatory to Contracts)

State of Incorporation

NOMINATION & GENERAL NOTICES

Attention: _____

Company Name

Address

City State Zip Code

Phone / Fax

PERSON REQUESTING SERVICE

(Complete only if different from Customer)

Name/Title

Company Name

Address

City State Zip Code

Phone / Fax

Agent for Customer: Yes ____ No ____

Asset Manager (if any)

INVOICES & STATEMENTS

Attention: _____

Name/Title

Company Name

Address

City State Zip Code

24-HOUR CONTACT

Dispatcher Name _____

Phone _____

Fax _____

AGENCY INFORMATION

If Customer is acting as agent for another entity, the following information must be provided:

- (a) Exact legal name of principal;
- (b) Principal's address and telephone number; and
- (c) Written proof of agent's authority must be attached.

II. AGREEMENT TERMS

Date service is requested to commence _____

Date service is requested to terminate _____ (If interruptible, term will be a monthly evergreen).

Maximum Daily Transportation Quantity (MDQ) _____

Dth/d Maximum Storage Quantity (MSQ) _____ Dth

Maximum Aggregate Quantity (PARK) _____ Dth

Maximum Aggregate Quantity (LOAN) _____ Dth

POINTS OF RECEIPT AND DELIVERY

For interruptible transportation service only, Customer will receive MRT's current effective Master Receipt and Delivery Point Lists with point quantities equal to MDQ (includes all Pipeline Interconnects).

For FTS and SCT service, please list specific Receipt and Delivery Points separately:

Point Desc. Or MRT Loc. I.D. 1/	Maximum Receipt Point Quantity Dth/d 2/	Point Desc. Or MRT Loc. I.D. 1/	Maximum Receipt Point Quantity Dth/d 2/
_____	_____	_____	_____
_____	_____	_____	_____
Point Desc. Or MRT Loc. I.D. 1/	Maximum Delivery Point Quantity Dth/d 3/	Point Desc. Or MRT Loc. I.D. 1/	Maximum Delivery Point Quantity Dth/d 3/
_____	_____	_____	_____
_____	_____	_____	_____

1/ If new facilities are required, please specify.

2/ For Rate Schedule FTS and SCT service, the sum of all individual Receipt Point MDQ (Primary Receipt Points) shall not exceed the Receipt Point MDQ in the aggregate. (Secondary Receipt Points will be automatically added to Service Agreement.)

3/ For Rate Schedules FTS and SCT service, the sum of all individual Maximum Delivery Point Quantities (Primary Delivery Points) shall not exceed MDQ in the aggregate. (Secondary Delivery Points will be automatically added to Service Agreement.)

III. REQUESTED FORM OF SERVICE

- ❖ NGPA SECTION 311 _____ (Subpart B)
Annual volume to be transported _____ Dth/d
Estimated total Volume to be transported over life of contract _____ Dth
- ❖ If LDC/Intrastate pipeline company will not be executing the Service Agreement, Customer must provide to MRT an acceptable "On-Behalf-Of" Certification for each "On-Behalf-Of" Entity consistent with current regulatory requirements.

SECTION 284 _____ (Subpart G)
Average Daily Volume to be transported _____ Dth/d
Annual volume to be transported _____ Dth
Peak Day volume to be transported _____ Dth
Estimated total volume to be transported over life of contract _____ Dth

IV. OTHER REQUIRED INFORMATION

1. Customer is:

a)Interstate _____ d)End User _____ g)Municipality _____
b)Intrastate _____ e)Producer _____ h)Other (Specify) _____
c)LDC _____ f)Marketer/Broker _____

Customer acknowledges by its signature that it is willing to abide by the terms of MRT's Third Revised Volume No. 1 Tariff.

Customer, by its signature, certifies to MRT that it has the authority to deliver the gas to MRT's system for transportation or storage.

Customer also certifies that the information herein is complete and accurate to the best of Customer's knowledge, information and belief.

Customer: _____	Requestor: _____
By: _____	By: _____
Signature: _____	Signature: _____
Title: _____	Title: _____
Date: _____	Date: _____

(If Applicable)

Releasing Customer: _____

By: _____

Signature: _____

Title: _____

Date: _____