



Transportation Affidavit

Marketing Rep Name: _____

Account Number: _____

Meter Number: _____

_____, _____, whose facilities are located at,
Legal Account/Customer Name Federal ID/EIN Number

_____, transports natural gas through the facilities of
Physical Meter Address

Kansas Gas Service, a division of ONE Gas, Inc., pursuant to its applicable tariffs. This affidavit is effective: _____
Effective Date Start of Transport

whereby authorizing: _____ to:
Third Party Marketer Name

- Forward to Kansas Gas Service our monthly nomination and any nomination revisions
- Receive information concerning our accounts
- Receive duplicate monthly billing statements upon request
- Coordinate the aggregation of my natural gas usage with other Kansas Gas Service customers also served by the same marketer for purposes of balancing

These authorizations will continue until a subsequent Transportation Affidavit or written cancellation is provided to Kansas Gas Service.

In accordance with the Winter Event Securitization Cost Recovery Rider, a settlement fee must be paid when switching from General Service to Transportation Service.¹ If the settlement fee is not paid by the due date of the final General Service bill, Kansas Gas Service will disconnect your service following the process outlined in our General Terms and Conditions. Service will remain disconnected until the full amount of the final bill (which includes the settlement fee) is paid, along with applicable reconnection fees.

Electronic Flow Measurement (EFM) is required for all new and existing Transport accounts, except for customers served under GITt and GTSR using less than 3,000 Mcf per year. The \$2,400 Installation fee may be paid in full or in installments of \$23.77 per month for 15 years.

A security deposit may be assessed or adjusted when transitioning from General Service to Transportation.

Signature: X _____ Title: _____

Printed Name: _____ Phone: _____ Signatory - Email Address: _____

Signatory - Mailing Address: _____

Billing Address: _____

Primary Emergency Contact Information

Name: _____

Title: _____

Email Address: _____

Day Phone: _____ Evening Phone: _____

Cell: _____

Secondary Emergency Contact Information

Name: _____

Title: _____

Email Address: _____

Day Phone: _____ Evening Phone: _____

Cell: _____

¹Financing Order, Docket No. 22-KGSG-466-TAR (August 18, 2022).

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Additional Accounts or Meters

Account Number	Meter Number	Physical Meter Address and City