

579 Tenney Mountain Highway Plymouth, NH 03264-3154 www.nhec.com 603-536-1800 / 800-698-2007

Electricity Supply Service Agreement Appendix A

Supplier must fill this form out completely and return it to the Cooperative prior to entering into a contract for services with the Cooperative. Failure to fill out this form completely will render the Cooperative unable to provide services for the Supplier.

4.	General Information	
1.	Legal Name of the Supplier	
2.	D.B.A. Name (if applicable)	
3.	Supplier Address	
4.	Type of Business Entity	
5.	Type of Supplier (select only one)	Competitive Electric Power Supplier Competitive Electric Power Supplier Serving Community Power Aggregations Community Power Aggregation Serving as Load Serving Entity
6.	Supplier Member Service Phone Number	
7.	Supplier Tax Identification Number	
8.	Supplier Dun & Bradstreet Number	

9.	Supplier General Contact	
9a.	Name	
9b.	Phone Number	
9c.	E-Mail Address	
10.	Supplier Technical Contact	
10a.	Name	
10b.	Phone Number	
10c.	E-Mail Address	
11.	Date Supplier Attended New Hampshire Supplier Training	
12.	Has Supplier Registered with New Hampshire Department of Energy?	
B. Bi	illing and Banking Information (for	Suppliers opting for Consolidated Billing Service)
1a.	Receiving Bank Name	
1b.	Receiving Bank Phone Number	
1c.	Receiving Bank E-Mail	
2.	Routing and Transit Number (ABA Number)	
3.	Bank Account Number	

C. 1	alue Added Network (VAN)	
1.	Name of VAN Provider	
2.	ISA Qualifier	
3.	ISA ID	
4.	GS Identifier	
D. S	Supplier's EDI Name and Contact	
1.	Supplier's EDI Provider	
2.	Supplier's EDI Contact	
2a.	Name	
2b.	Phone Number	
2c.	E-Mail Address	
E. S 1. 2.	Name of the NEPOOL Settlement Acco Name of the NEPOOL Participant in whose NEPOOL Settlement Account the Supplier's load obligation will be reflected Settlement Account Number	unt
3.	Supplier's NEPOOL Contact	
3a.	Name	
3b.	Phone Number	
3c.	E-Mail Address	
4.	Estimated Maximum Load (kW Demand)	
5.	Estimated Effective Date (MM/DD/YYYY)	

F. 3	Supplier's Load Settlement Contact	
1a.	Name	
1b.	Phone Number	
1c.	E-Mail Address	
G. I	Notice	
1.	Authorized Business Representative #1	
1a.	Name	
1b.	Address	
1c.	Phone Number	
1d.	E-Mail Address	
2.	Authorized Business Representative #2	
2a.	Name	
2b.	Address	
2c.	Phone Number	
2d.	E-Mail Address	

1a.	Company Name (max 30 characters)	
1b.	Address Line 1 (max 40 characters)	
1c.	Address Line 2 (max 40 characters)	
1d.	Telephone (toll-free) (max 12 characters)	
1e.	E-Mail Address (max 36 characters)	
	ctors in NHEC's billing system.	Supplier staff authorized to establish or change rate
1.	Authorized Rate Requestor #1	
la.	Name	
1b.	E-Mail Address	
2.	Authorized Rate Requestor #2	
2a.	Name	
2b.	E-Mail Address	
3.	Authorized Rate Requestor #3	
3a.	Name	
3b.	E-Mail Address	
4.	Authorized Rate Requestor #4	
4a.	Name	
4b.	E-Mail Address	

H. Member Billing Information – to appear on New Hampshire Electric Cooperative bills.

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COOPERATIVE SPECIFIC PROVISIONS

1. Fees

Supplier agrees to pay any fees detailed in the Cooperative's tariff. The Cooperative shall notify Supplier of the approval of any such fees.

2. Holidays and Time

Any reference made with respect to time either in this Agreement or the EDI Standards is understood to be Eastern Prevailing Time.

The Cooperative observes the following holidays and will not receive or process electronic transactions on the following days: New Year's Day, Martin Luther King Jr. Day, Memorial Day, Independence Day, Labor Day, Veterans Day, Thanksgiving Day, The Day after Thanksgiving, Christmas Eve, and Christmas Day. All holidays will be the nationally observed day or as otherwise posted by the Cooperative on its website. ISO-NE settlement holidays are as posted on their website.

3. Electronic Transmission of Invoices

The parties agree that invoices may also be transmitted electronically.

For Supplier
Printed Name
Title
Signature
Date
For New Hampshire Electric Cooperative
For New Hampshire Electric Cooperative Printed Name
Printed Name