## CREDIT APPLICATION



### CONFIDENTIAL

**SEND COMPLETED APPLICATION TO:**

**ATTN: REVENUE OPERATIONS, BILLING**

**PPL ELECTRIC UTILITIES**

**827 HAUSMAN RD EGS CREDIT APPLICATION**

**ALLENTOWN, PA 18104**

|  |  |
| --- | --- |
| **LEGAL NAME**      | DUNS#      |
| **BILL TO: (NAME)**      |
| **STREET:**      |
| **CITY, STATE, ZIP:**      |
| **TYPE OF BUSINESS:****[ ]  Corporation      [ ]  Partnership      [ ]  Proprietorship** | **MINORITY BUSINESS:** **[ ]   Yes       [ ]   No** |
| **IS CORPORATE STOCK TRADED?** **[ ]   Yes     [ ]   No    Symbol** | **MOODY’S, S&P, OR OTHER CREDIT RATINGS:****Unsecured:**       **Secured:**       **CP:**       |
| **ACCOUNTS PAYABLE MANAGER:**      | **PHONE #**      | **FAX #**      |
| **ESTIMATED GROSS ANNUAL REVENUE IN PPL TERRITORY*****( This section must be completed otherwise application will not be processed)*** |

BANK REFERENCE

|  |  |  |
| --- | --- | --- |
| **BANK NAME**      | **ACCOUNT #**      | **CONTACT PERSON AT BANK:**      |
| **STREET ADDRESS**      | **CITY, STATE**      | **ZIP**      | **PHONE #**       |
| **FAX #**       |

MAJOR TRADE REFERENCES

|  |  |  |
| --- | --- | --- |
| **COMPANY NAME**      | **ACCOUNT #:**      | **CONTACT PERSON AT REFERENCE:**      |
| **STREET ADDRESS**      | **CITY, STATE**      | **ZIP**      | **PHONE #**       |
| **FAX #**       |
| **COMPANY NAME**      | **ACCOUNT #:**      | **CONTACT PERSON AT REFERENCE:**      |
| **STREET ADDRESS**      | **CITY, STATE**      | **ZIP**      | **PHONE #**       |
| **FAX #**       |
| **COMPANY NAME**      | **ACCOUNT #:** | **CONTACT PERSON AT REFERENCE:** |
| **STREET ADDRESS**      | **CITY, STATE**      | **ZIP**      | **PHONE #**       |
| **FAX #**       |

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| **The undersigned being authorized and acting on behalf of the entity identified above:**1. **Hereby authorizes PPL Electric Utilities Corporation (PPL) to make such inquiries as PPL considers to be necessary to obtain credit information and authorizes our bank(s) of record to release credit information regarding our account(s).**
2. **Hereby represents and warrants that all information (including any financial statements) now or hereafter supplied by or on behalf of the entity identified above to PPL is true and correct and does not omit any information whose omission would cause the information supplied to be materially misleading or incomplete.**
3. **Hereby agrees the entity identified above shall make any purchases from PPL solely in accordance with procedures established in Contract(s) with PPL. All such purchases shall be subject to acceptance by PPL and shall be governed solely by the terms and conditions of said Contract(s).**

 **SIGNATURE TITLE (Duly Authorized)** **PRINTED NAME DATE** |



**EGS Credit Application Supplement**

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| 1. When do you expect to start serving load in PPL Electric Utilities Service territory? |
|  |       |
| 2. What is your estimated Gross Annual Revenue in PPL Electric Utilities Service territory? |
|  |       |
| 3. Do you expect to offer an EGS Consolidated bill? |
|  |       |
| 4. What is your anticipated/projected load in MW? |
|  |       |
| 5. What is your projected number of customers to be served? |
|  |       |
| 6. What customer classes are you looking to serve? |
| **[ ]** Residential **[ ]** Industrial/Commercial *(Please check those that apply)* |

Please provide an estimate of your projected annual usage by rate class.

Residential Classes

|  |  |  |  |
| --- | --- | --- | --- |
| **Rate Class** | **kWh** | **Rate Class** | **kWh** |
| RS |       |       |       |
| RTD |       |       |       |
| RTS |       |       |       |
| Street & AreaLighting |       |       |       |

Industrial/Commercial Classes

|  |  |  |  |
| --- | --- | --- | --- |
| **Rate Class** | **kWh** | **Rate Class** | **kWh** |
| GS1 |       | IS1 |       |
| GS3 |       | ISM |       |
| LP4 |       | IST |       |
| LP5 |       | LPEP |       |
| LP6 |       | GH1 |       |
| ISP |       | GH2 |       |