

TRANSGAS LIMITED SCHEDULE OF SERVICE

Customer Name:

Type of Service: Firm Low Heating Value
Surcharge Service

Rate Code: HV002

I. Effective: 20 _____, 09:00 Central Clock Time (CCT)

Contract No.	Receipt Point	CSO Agreement	Max. Daily Qty (g/d)	Min. Heat Value	Expiry Date

II.

Renewal Rights: To terminate upon expiry date unless a request for renewal is approved prior to the expiry date. (NRR)

III. Additional Conditions: n/a

IV. Comments:

This schedule forms part of the Agreement, dated _____ between _____ and TransGas Limited, which binds the companies to the TransGas Limited Comprehensive Tariff and shall be deemed to be attached thereto.

AGREED TO AND ACCEPTED THIS _____ DAY OF _____, 20__

PER: _____
CUSTOMER NAME

AGREED TO AND ACCEPTED THIS _____ DAY OF _____, 20__

PER: _____
TRANSGAS LIMITED