

Application for NSPI Domestic Service Rate for non-residential customers (as provided under Section 73, *Public Utilities Act*)

This is an application for the Domestic Service Rate (Bi-Monthly) for customers who may qualify under Subsection 3 of Section 73 of the *Public Utilities Act*, R.S.N.S. 1989, c380, as amended.

To apply please fill out the following form and return by mail, fax or email or if you have any questions please contact:

Phone: 902-428-6917

Email: Votek.Grus@nspower.ca

Mail: Voytek Grus Nova Scotia Power, PO Box 910, Halifax, NS, B3J 2W5

Date of Application:

Name of Organization:

Mailing Address:

Service Address (if different from Mailing Address):

Contact Person:

Phone Number:

NSPI 8 digit Account Number:

Meter Number (optional):

Which of the following qualifying facilities listed in the *Public Utilities Act*, Section 73 applies to your organization?

- Senior citizens club;
- Service club;
- Volunteer fire department;
- Royal Canadian Legion;
- Community hall or recreational facility that is owned by a community and used for general community purposes;
- Charitable or religious organization or institution.
- Non-profit farmers' market with a valid public market permit.

Please provide a brief description of your group or organization and its purpose.

Do you have salaried employees? Yes No

If yes, how many salaried employees are in your group or organization?

If your group or organization has a governing body, please provide a brief description and the names of the individuals involved.

Does your organization utilize volunteers (excluding Board of Directors)? Yes No

If yes, please describe the roles that volunteers play in the operation of the organization.

Please list any community activities your group or organization may have undertaken last year.

Please note:

- **It is the responsibility of the group or organization to notify NS Power about any change in your organization's status.**
- **The effective date of the rate change to your account will be the first regular billing date after NSPI has received, reviewed and approved your application.**

Authorized Agent (Please print)

Signature

Position