

CONTRACTS
REPORT OF EXEMPTION FROM SURCHARGE TO FUND
CA PUBLIC UTILITIES COMMISSION (G-SRF), Form No. 3090

(See Attached Form)

(TO BE INSERTED BY UTILITY)

ADVICE LETTER NO. 4472
DECISION NO.

ISSUED BY

Lee Schavrien
Senior Vice President

(TO BE INSERTED BY CAL. PUC)

DATE FILED Mar 11, 2013
EFFECTIVE Apr 10, 2013
RESOLUTION NO. _____

Report of Exemption from Surcharge to Fund CA Public Utilities Commission (Schedule G-SRF)

Instructions:

To request an exemption from charges under Schedule G-SRF, a completed and signed version of this form must be received by Southern California Gas no later than the third (3rd) business day of the month immediately following the month during which the exempt gas quantities were consumed (e.g. to claim an exemption for quantities consumed in February, this form must be received no later than the third (3rd) business day of March), unless prior to this date the Utility and Customer agree to an alternate receipt date.

If applying for the G-SRF exemption for eligible gas quantities consumed during the previous month, complete Section 1.

Section 1: Monthly G-SRF Exempt Quantities

Month _____

Amount of gas usage exempt from G-SRF _____ (therms) or _____% of total gas usage billed to the Account specified below during such month.

If all (100%) gas usage for that Account will be for electric generation for wholesale sale to an electric, gas, or steam public utility or the California Independent System Operator and all will be exempt on a continuous basis, complete Section 2. Indicate the beginning and end of the period to be covered by the exemption, which shall not exceed twelve (12) consecutive calendar months.

Section 2: Prospective G-SRF Exempt Quantities (complete if 100% of gas usage will be for qualifying electric generation at your facility and is eligible for an exemption.)

First day of exemption period (e.g. March 1, 2010) _____

Last day of exemption period (e.g. February 28, 2011) _____

Certification:

Customer Name: _____

Account Number: _____

Service Address: _____

I hereby certify that the gas quantities identified in this form meet the requirements to receive an exemption from G-SRF charges and request the exemption from associated G-SRF charges.

Authorized Signature on Behalf of Customer: _____

Date of Signature: _____

Type/Print Name _____

Title _____

Contact Phone Number _____

Contact E-mail: _____

Please email, fax or mail a completed and signed form(s) to:

Major Markets Billing Department
Mail Location GT18A5
Southern California Gas Company
P. O. Box 513249
Los Angeles, CA 90051-1249
or E-mail: scgbillingrequest@semprautilities.com
or Fax (213) 244-8449