

Niagara Mohawk Power Corporation d/b/a National Grid

Demand Response Programs Application Form

National Grid (the “Company”) administers Distribution Load Relief (DLRP) and Commercial System Relief (CSR) Programs in response to the NY Public Service Commission’s order in Case 14-E-0423, as well as Term-DLM and Auto-DLM Programs in response to the Commission’s order in Case 18-E-0130, individually “Program”, or collectively “Programs”. These Programs will enable eligible customers to earn incentives for load reduction when called upon by the Company during the summer capability period of May 1 through September 30. Customers participating in these Programs must install or have installed an interval-based meter. Customers must be served under the following Service Classifications: 1, 2 (Special Provision P), 3 (Special Provision L), 3A, 4, 7, or 12.

Customers must submit this application as evidence of their intent to provide load reduction for the current year capability period in accordance with Rules 61, 62, or 65 – Peak Shaving Load Relief Program of the Company’s General Electric Tariff. Customers wishing to participate in this program must complete this form and return it to DR@nationalgrid.com.

Enrollment in the Company Program(s) is voluntary. By signing this form, you agree you are the account holder of record or authorized representative, and you agree to all Program(s) terms for the current year capability period. Additional Program materials, including Program Guidelines and Procedures as well as relevant tariff leaves may be found at ngrid.com/electricdr.

CUSTOMER TYPE*

- ☐ Curtailment Service Provider
(CSP must separately supply all requested information for each Customer being represented)
- ☐ Direct Customer

**All applicants must attach a current W9 Form.*

Select a Program: ☐ CSR ☐ Auto-DLM ☐ DLRP (provide location) _____
☐ Term-DLM (specify vintage year) _____ ☐ Auto-DLM (specify vintage year) _____

Total Contracted kW of Load Relief:

Select Baseline Methodology: ☐ Average Day ☐ Weather adjusted

CURTAILMENT SERVICE PROVIDER/DIRECT CUSTOMER INFORMATION

Customer/CSP Name:

Mailing Address:

City, State, Zip:

Phone:

Account Number:

E-mail Address:

Contact Name:

Demand Response Programs Application Form *continued***CUSTOMER GENERATOR INFORMATION (IF APPLICABLE)**

Serial Number:

Nameplate Rating:

Manufacturer:

Date of Manufacture:

Fuel Type/Energy Source:

kW Enrolled:

Generator Features
(Select all that apply):

- ☐ Three-Way Catalyst Emission Controls
- ☐ Natural Gas burn Engine model year 2000 or newer
- ☐ Diesel-Fired Engine model year 2000 or newer
- ☐ NOx Emission Level no more than 2.96 lb/mWh

DISCLAIMER AND SIGNATURE

Customer shall indemnify, defend and hold harmless the Company, its affiliates and their respective contractors, officers, directors, employees, agents, representatives from and against any and all claims, damages, losses and expenses, including reasonable attorneys' fees and costs incurred to enforce this indemnity, arising out of, resulting from, or related to the Program(s) or the performance of any services or other work in connection with the Program(s) ("Damages"), caused or alleged to be caused in whole or in part by any actual or alleged act or omission of the Customer, any subcontractor, agent, or third party, or anyone directly or indirectly employed by any of them or anyone for whose acts any of them may be liable. To the fullest extent allowed by law, the Company's aggregate liability, regardless of the number of claims, shall be limited to paying approved compensation in accordance with above referenced tariff leaves and the Program Materials, and the Company and its affiliates and their respective contractors, officers, directors, employees, agents, representatives shall not be liable to the Customer or any other party for any other obligation. To the fullest extent allowed by law and as part of the consideration for participation in the Program(s), the Customer waives and releases the Company and its affiliates from all obligations (other than any compensation described in the tariff), and for any liability or claim associated with the Program(s), the performance of the Program(s), or these Terms and Conditions. By signing this application, you certify that you are the account holder or authorized representative and acknowledge that you are responsible for providing accurate customer data and attest to adherence of these terms and National Grid's tariff under this Program.

Signature:

Name:

Date: