

ACCOUNT HISTORY PERMISSION

FORM 1045 (5-14) OGS



(Date)

ATTN: Amy Jenkins
Transportation Services
Oklahoma Natural Gas Company
P.O. Box 401
Oklahoma City, OK 73101-0401

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_____ has given permission for the following 3rd party supplier, _____
to access their account history.

This involves complete account number(s) (including customer and premise number):

OKLAHOMA NATURAL GAS ACCOUNT NUMBERS:

Sincerely,

SIGNATURE ►

PRINT NAME

TITLE

ADDRESS

E-MAIL

ACCOUNT VOLUMES NEED TO BE PROVIDED TO:

E-MAIL

FAX