

**NOTIFICATION OF ASSUMPTION OF
CONSUMER PROPANE SERVICE**

Pursuant to G.S. §119-58(b) and 02 NCAC 38 .0705, this serves to notify your company that service to the following consumer is being assumed by another propane company.
(NOTE: Do **NOT** send a copy of this notification to NCDA&CS. For originating company's protection, NCDA&CS suggests that a copy of this form be retained.)

Consumer Name _____

Consumer Address _____

City, State, Zip Code _____, NC, _____

New Supplier Name _____

New Supplier Address _____

City, State, Zip Code _____, _____, _____

New Supplier Telephone Number (_____) _____ - _____

Date old service is to be disconnected _____

Time old service is to be disconnected _____

Does this notification also include notification that the propane in the existing tank will be transferred to the new company's tank? Yes _____ No _____

Notice sent to (company) _____ (city) _____

Notice sent on (date) _____ at (time) _____ AM/PM

Method of notification: Mail _____ Overnight mail _____
(Check one) Facsimile _____ Hand delivery _____

Providing above information complies with rule for notification.

(The following fields may be used by the originating office for their information.)

Confirmation method: Signature _____ Return receipt _____
(Check one) Facsimile report _____ None _____ Other _____

Confirmation attached? Yes No (circle one)