



AUTOMATIC NAME CHANGE CONTRACT

This agreement, effective this _____ day of _____, is by and between Washington Gas Light Company (WG) and _____ (Manager / Owner of Property).

Whereas, Manager is the owner or manager of an apartment building or single-family dwelling located at _____ (see attached list if more than one); and

Whereas the tenants receive individual gas service from WG in their own names, and

Whereas, Manager would like to continue gas service during those periods when the property is vacant, but not pay service initiation fees, and

Whereas WG will benefit from not having to turn the gas service off and then on again within a short period,

Now therefore the parties agree as follows:

When a tenant at the property notifies WG that the tenant will move out of the property, WG will automatically transfer the service to Manager's name, without imposing a service initiation fee. The date of the transfer will be the date requested by the tenant, and any disputes about the date of transfer will be resolved between the tenant and Manager. Manager will be responsible for paying the bill until WG transfers the service to the name of the new tenant. Automatic service transfers will not occur if the gas service at the property is discontinued for non-payment.

Manager may discontinue service to a particular property only by sending WG a written notice requesting such discontinuation, and scheduling a meter reading date. Manager is responsible for providing access to the meter on the reading date.

This agreement shall be for an initial term of one year, beginning on the date first written above, and shall continue on a month to month basis until terminated. Either party may terminate after the initial term, by providing a written notice of termination to the other party, such termination to be effective on the next regular meter reading date after the notice is received and processed.

WG may terminate for cause if Manager requests termination of service to individual apartments or single-family dwellings more than two times in a twelve-month period.

Notices are to be sent to:

Washington Gas
6801 Industrial Rd.
Springfield, VA 22151
Attn: ANCP Desk

Billing Information:

Billing Name: _____

c/o: _____

Street Address: _____

City, State & Zip: _____

In witness whereof, the parties, intending to be bound, have executed this Agreement.

Manager:

_____/_____/_____
Signature of Officer, Agent, Property Owner Date Title or Representative Capacity

_____/_____
Printed Name of Officer, Agent, Property Owner Business Phone Home Phone w/Area Codes

Washington Gas:

_____/_____/_____
Signature of Washington Gas Representative Date Title or Representative Capacity