

Act 127 Pennsylvania Pipeline Operator Annual Registration Form

| | Please | sul | bmi | t complete | d fo | rm by | y Mar | rch 31 | | | | |
|--------|---|--------------|-------------|--------------|----------------|----------------|-----------------|-----------------|-----------------------|----------|------------|--------------|
| | | | | | | | | | | | | |
| _ | istration for Previous Calendar Year E | ۱dir | ng: | | | | | | | | | |
| | ket Number: | | | | | | | | | | | |
| If you | | nk o of F | n th Reg | e lower se | ction eline | of the Oper | e pag rators | je under s." | Pipeline | e Opera | ators Reg | gistry. |
| 1. | Registrant (Full name of pipeline ope | | | | NOUT | | | | | | DUCKCI | |
| | | | <u>•.,.</u> | <u> </u> | | | | | | | | |
| | ments: If applicable, explain any change calendar year. | s to | o yo | ur compan | y nar | ne or | lega | l status (| acquisit | ion, me | erger, etc | c.) in the |
| | | | | | | | | | | | | |
| | | | | | | | | | | | | |
| 2. | Types of Pipelines and/or Facilities. Please note that natural gas public u Pipelines and/or facilities covered I transport the following types of com Gas Distribution | oy t | this | form are | ass | ociat | ed w | ith the | <u>ı.</u> followiı | ng typ | es of fa | cilities and |
| | | Тг | Dron | | | | | | | | | |
| | Natural Gas | | rop | ane Gas | | | | | | | | |
| | Gas Transmission | | | | | | | | | | | |
| | Natural Gas | ТГ | | | | | | | | | | |
| | Propane Gas | ┼┾ | = | | | | | | | | | |
| | Other Gas | ┼┾ | - | Define: | | | | | | | | |
| | | | | Donno. | | | | | | | | |
| | Gas Gathering | ТΓ | | | | | | | | | | |
| | Hazardous Liquid | ╋ | = | | | | | | | | | |
| | Other | | | Define: | | | | | | | | |
| | | | _ | | | | | | | | | |
| 3. | Main Mailing Address: Provide the address to which the Co | mm | niss | ion will se | rve a | nll co | rresp | oondenc | e relati | ng to ti | his regis | stration. |
| | Street Address/P. O. Box: | \perp | | | | | | | | | | |
| | City, State, Zip Code: | | | | | | | | | | | |
| 4. | Physical Address: Provide the address of your primary perform inspections and onsite visit Do not provide a post office box nun | s. | | ylvania fa | cility | . Thi | is ad | dress is | needec | d by the | e Comm | ission to |
| | Street Address: | | | | | | | | | | | |
| | City, State, Zip Code: | \bot | | | | | | | | | | |
| 5. | US DOT Operator ID Number: Provide the number assigned to you Department of Transportation, Pipeli Materials Safety Administration (PHI | ne | Haz | | | | | | | | | |
| 6. | PA L&I Propane Registration Numbe Provide your propane registration nu Pennsylvania Department of Labor a If you do not have a number, please | ımt nd i | Ind | ustry (if ap | oplica | able). | | | | | | |

| 7. | Regulatory Contact Information: | |
|---------------------------------------|---|---|
| | Complete in full with contact inform | ation of the person in your company the Commission can contact for |
| | | ing to your registration and operations. |
| | Name: | |
| | | |
| | Street Address: | |
| | City, State, Zip Code: | |
| | | |
| | Email Address: | |
| | | |
| | Telephone Number: | |
| | | |
| 8. | Assessment Contact Information: | |
| | | ation of the person in your company who is responsible for receiving the |
| | | invoices and paying the assessment under Act 127. |
| | Name: | |
| | | |
| | Street Address: | |
| | City, State, Zip Code: | |
| | | |
| | Email Address: | |
| | | |
| | Telephone Number: | |
| | | |
| 9. | Federal EIN Number (if applicable): | |
| | Pipeline Emergency (PEMA) Contact | |
| 10. | Complete in full with contact inform an emergency situation. This inform Emergency Management Authority (| ation of the person in your company who the Commission can call in ation is critical to the Commission's interactions with the Pennsylvania |
| | Name: | |
| | | |
| | Street Address: | |
| | City, State, Zip Code | |
| | | |
| | Email Address: | |
| | | 1 |
| | Telephone Number: | |
| | | |
| 11. | Attorney (if applicable): | |
| | | rney is filing this registration form on your company's behalf. |
| | Name: | |
| | | |
| | Street Address: | |
| | City, State, Zip Code | |
| | | |
| | Email Address: | |
| | | 1 |
| | Telephone Number: | |
| | | 1 |
| 12. | Operational Information: | |
| | | |
| | | ne, and explain any additions, deletions or variations since your previous |
| year | 's registration. | |
| | | |
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| Complete Attachments "A" and "B". For each Pennsylvania ga mileage in operation as of December 31 of the prior year, by c each individual pipe. Multiple pipelines in one trench are consi have no miles to report on these attachments, check the appro- | lass and by county. Mileage should be reported for idered individual pipes for reporting purposes. If you |
|--|---|
| Complete Attachment "C" by providing the country of manufaction installed in the prior calendar year in Pennsylvania for the exp hazardous liquids. If you have no data to report on this attachment. | cture and mileage data for all tubular steel products loration, gathering or transmission of natural gas or |
| 13. Filing Fee: | |
| The filing fee for this Annual Registration Form is \$250, payal The filing fee can either be mailed or electronically paid when eFil NOTE: If you are a Propane Distributor registered with the PA | ing your form with the Commission's eFiling system. |
| filing fee. | |
| Fee Exemptions (please indicate if either exemption applie | es). |
| Propane Distributor registered with PA L&I | 7 |
| Borough | |
| | |
| 14. Verification: | |
| The person responsible (corporate officer or attorney) for filin her signature and verify that all information provided on the f information and belief. <u>NOTE: Registration Forms that are no</u> | form is true to the best of his or her knowledge, |
| I hereby state that the information in this application is true and co | react to the best of my knowledge, information and |
| belief. I understand that the statements herein are made subject to | |
| unsworn falsification to authorities). | |
| | |
| Name: | Cignoture |
| | Signature: The St. M. |
| | Troy Stahle |
| | roy Stanle |
| Title: | Date: |
| | roy Stanle |
| Title: | roy Stanle |
| Title: 15. Registration: | roy Stanle |
| Title: 15. Registration: eFiling: | Date: |
| Title: 15. Registration: | Date: your renewal form, go to http://www.puc.pa.gov and |
| Title: Title: IS. Registration: eFiling: Registration Forms may be eFiled with the PUC. If eFiling click on the eFiling link on the bottom of the page under Issues, Notype of filing and enter your docket number where indicated. By mail: | Date: your renewal form, go to <u>http://www.puc.pa.gov</u> and ews & Reports. Please choose "Existing Case" as the |
| Title: Title: IS. Registration: eFiling: Registration Forms may be eFiled with the PUC. If eFiling click on the eFiling link on the bottom of the page under Issues, Notype of filing and enter your docket number where indicated. By mail: Send original, signed copy of registration form along with | Date: your renewal form, go to <u>http://www.puc.pa.gov</u> and ews & Reports. Please choose "Existing Case" as the |
| Title: Title: eFiling: eFiling: Registration Forms may be eFiled with the PUC. If eFiling click on the eFiling link on the bottom of the page under Issues, Notype of filing and enter your docket number where indicated. By mail: Send original, signed copy of registration form along with Secretary, PA Public Utility Commission | Date: your renewal form, go to <u>http://www.puc.pa.gov</u> and ews & Reports. Please choose "Existing Case" as the |
| Title: Title: Intersection Forms eFiling: Registration Forms may be eFiled with the PUC. If eFiling click on the eFiling link on the bottom of the page under Issues, Notype of filing and enter your docket number where indicated. By mail: Send original, signed copy of registration form along with Secretary, PA Public Utility Commission Keystone Building, 2 nd Floor | Date: your renewal form, go to <u>http://www.puc.pa.gov</u> and ews & Reports. Please choose "Existing Case" as the |
| Title: Title: Is. Registration: eFiling: Registration Forms may be eFiled with the PUC. If eFiling click on the eFiling link on the bottom of the page under Issues, Notype of filing and enter your docket number where indicated. By mail: Send original, signed copy of registration form along with Secretary, PA Public Utility Commission Keystone Building, 2 nd Floor 400 North Street | Date: your renewal form, go to <u>http://www.puc.pa.gov</u> and ews & Reports. Please choose "Existing Case" as the |
| Title: Title: Is. Registration: eFiling: Registration Forms may be eFiled with the PUC. If eFiling click on the eFiling link on the bottom of the page under Issues, Notype of filing and enter your docket number where indicated. By mail: Send original, signed copy of registration form along with Secretary, PA Public Utility Commission Keystone Building, 2 nd Floor 400 North Street Harrisburg, PA 17120 | Date: your renewal form, go to <u>http://www.puc.pa.gov</u> and ews & Reports. Please choose "Existing Case" as the |
| Title: Title: Is. Registration: eFiling: Registration Forms may be eFiled with the PUC. If eFiling click on the eFiling link on the bottom of the page under Issues, Notype of filing and enter your docket number where indicated. By mail: Send original, signed copy of registration form along with Secretary, PA Public Utility Commission Keystone Building, 2 nd Floor 400 North Street Harrisburg, PA 17120 Reminders: | Date: your renewal form, go to http://www.puc.pa.gov and ews & Reports. Please choose "Existing Case" as the attachments and filing fee (if applicable) to: |
| Title: Title: Is Registration: eFiling: Registration Forms may be eFiled with the PUC. If eFiling click on the eFiling link on the bottom of the page under Issues, Notype of filing and enter your docket number where indicated. By mail: Send original, signed copy of registration form along with Secretary, PA Public Utility Commission Keystone Building, 2 nd Floor 400 North Street Harrisburg, PA 17120 Reminders: It is the responsibility of registrants to keep the Commission | Date: your renewal form, go to http://www.puc.pa.gov and ews & Reports. Please choose "Existing Case" as the attachments and filing fee (if applicable) to: |
| Title: Title: Is. Registration: eFiling: Registration Forms may be eFiled with the PUC. If eFiling click on the eFiling link on the bottom of the page under Issues, Notype of filing and enter your docket number where indicated. By mail: Send original, signed copy of registration form along with Secretary, PA Public Utility Commission Keystone Building, 2 nd Floor 400 North Street Harrisburg, PA 17120 Reminders: It is the responsibility of registrants to keep the Comminformation by providing notice, in writing, to the Comminformation by providing notice, in writing, to the Comminformation by providing notice, in writing, to the Comminformation forms or those missing any at delayed for processing until the required information | Date: your renewal form, go to http://www.puc.pa.gov and ews & Reports. Please choose "Existing Case" as the attachments and filing fee (if applicable) to: nission notified of any changes to your contact mission's Secretary at the above address. ttachments are unacceptable for filing and will be is sent to the Commission's Secretary's Bureau. If |
| Title: 15. Registration: eFiling: Registration Forms may be eFiled with the PUC. If eFiling click on the eFiling link on the bottom of the page under Issues, Notype of filing and enter your docket number where indicated. By mail: Send original, signed copy of registration form along with Secretary, PA Public Utility Commission Keystone Building, 2 nd Floor 400 North Street Harrisburg, PA 17120 Reminders: It is the responsibility of registrants to keep the Comminformation by providing notice, in writing, to the Comminformation by providing notice, in writing, to the Commission | Date: your renewal form, go to http://www.puc.pa.gov and ews & Reports. Please choose "Existing Case" as the attachments and filing fee (if applicable) to: nission notified of any changes to your contact mission's Secretary at the above address. ttachments are unacceptable for filing and will be is sent to the Commission's Secretary's Bureau. If leting this form, call 717-772-7777. T place social security numbers, credit card |
| Title: 15. Registration: eFiling: Registration Forms may be eFiled with the PUC. If eFiling click on the eFiling link on the bottom of the page under Issues, N type of filing and enter your docket number where indicated. By mail: Send original, signed copy of registration form along with Secretary, PA Public Utility Commission Keystone Building, 2 nd Floor 400 North Street Harrisburg, PA 17120 Reminders: It is the responsibility of registrants to keep the Comm information by providing notice, in writing, to the Com e Incomplete registration forms or those missing any at delayed for processing until the required information you require assistance or have questions when comp • Registrations are public records. Accordingly, DO NO | Date: your renewal form, go to http://www.puc.pa.gov and ews & Reports. Please choose "Existing Case" as the attachments and filing fee (if applicable) to: nission notified of any changes to your contact mission's Secretary at the above address. Attachments are unacceptable for filing and will be is sent to the Commission's Secretary's Bureau. If leting this form, call 717-772-7777. T place social security numbers, credit card I information on the registration form. |
| Title: Title: It is the responsibility of registration forms may be eFiled with the PUC. If eFiling click on the eFiling link on the bottom of the page under Issues, N type of filing and enter your docket number where indicated. By mail: Send original, signed copy of registration form along with Secretary, PA Public Utility Commission Keystone Building, 2 nd Floor 400 North Street Harrisburg, PA 17120 Reminders: • It is the responsibility of registrants to keep the Comminformation by providing notice, in writing, to the Comminformating by thetee by thetee | Date: your renewal form, go to http://www.puc.pa.gov and ews & Reports. Please choose "Existing Case" as the attachments and filing fee (if applicable) to: nission notified of any changes to your contact mission's Secretary at the above address. Attachments are unacceptable for filing and will be is sent to the Commission's Secretary's Bureau. If leting this form, call 717-772-7777. T place social security numbers, credit card I information on the registration form. GISTRATION FORM FOR YOUR RECORDS********* |

Hazardous Liquids Lines Calendar Year Ending: Pipeline Operator:

Please check here if you have no reportable Hazardous Liquids Lines

Please report mileage to the nearest 1/10th of a mile.

HCA = High Consequence Area

| | Intras | tate | Inte | | | |
|------------|----------|------|---------|-----|-------|--|
| County | Non-HCA | HCA | Non-HCA | HCA | Total | |
| Adams | | | | | | |
| Allegheny | | | | | | |
| Armstrong | | | | | | |
| Beaver | | | | | | |
| Bedford | | | | | | |
| Berks | | | | | | |
| Blair | | | | | | |
| Bradford | | | | | | |
| Bucks | | | | | | |
| Butler | | | | | | |
| Cambria | | | | | | |
| Cameron | | | | | | |
| Carbon | | | | | | |
| Centre | | | | | | |
| Chester | | | | | | |
| Clarion | | | | | | |
| Clearfield | | | | | | |
| Clinton | | | | | | |
| Columbia | | | | | | |
| Crawford | | | | | | |
| Cumberland | | | | | | |
| Dauphin | | | | | | |
| Delaware | | | | | | |
| Elk | | | | | | |
| Erie | | | | | | |
| Fayette | | | | | | |
| Forest | | | | | | |
| Franklin | | | | | | |
| Fulton | | | | | | |
| Greene | | | | | | |
| Huntingdon | | | | | | |
| Indiana | | | | | | |
| Jefferson | | | | | | |
| Juniata | | | | | | |
| Lackawanna | | | | | | |
| | | | | | | |
| Lancaster | | | | | | |
| Lawrence | | | | | | |
| Lebanon | | | | | | |
| Lehigh | | | | | | |
| Luzerne | <u>↓</u> | | | | | |
| Lycoming | ┤ | | | | | |
| McKean | ┤ | | | | | |
| Mercer | <u> </u> | | | | | |
| Mifflin | | | | | | |
| Monroe | | | | | | |
| Montgomery | | | | | | |

| Montour | | | |
|----------------|--|--|--|
| Northampton | | | |
| Northumberland | | | |
| Perry | | | |
| Philadelphia | | | |
| Pike | | | |
| Potter | | | |
| Schuylkill | | | |
| Snyder | | | |
| Somerset | | | |
| Sullivan | | | |
| Susquehanna | | | |
| Tioga | | | |
| Union | | | |
| Venango | | | |
| Warren | | | |
| Washington | | | |
| Wayne | | | |
| Westmoreland | | | |
| Wyoming | | | |
| York | | | |
| | | | |
| Total | | | |

Mileage Calendar Year Ending: Pipeline Operator:

Please check here if you have no miles to report

Act 127 mileage reporting for this form should not include any pipelines subject to the exclusive jurisdiction of the Federal Energy Regulatory Commission.

Please report mileage to the nearest 1/10th of a mile.

| | | | | | Gatherir | | | |
|------------|------------------------------|--|--|--|---|---|---|---|
| | Number of Farm Taps | Class 1 Gathering (Conventional) | Class 1 Gathering (Unconventional) | Class 1 Transmission & Distribution | Class 2 Gathering Transmission & Distribution | Class 3 Gathering Transmission & Distribution | Class 4 Gathering Transmission & Distribution | Total Class 1 T&D + Class 2+3+4 |
| County | | | | | | | | G,T&D |
| Adams | | | | | | | | |
| Allegheny | | | | | | | | |
| Armstrong | | | | | | | | |
| Beaver | | | | | | | | |
| Bedford | | | | | | | | |
| Berks | | | | | | | | |
| Blair | | | | | | | | |
| Bradford | | | | | | | | |
| Bucks | | | | | | | | |
| Butler | | | | | | | | |
| Cambria | | | | | | | | |
| Cameron | | | | | | | | |
| Carbon | | | | | | | | |
| Centre | | | | | | | | |
| Chester | | | | | | | | |
| Clarion | | | | | | | | |
| Clearfield | | | | | | | | |
| Clinton | | | | | | | | |
| Columbia | | | | | | | | |
| Crawford | | | | | | | | |
| Cumberland | | | | | | | | |
| Dauphin | | | | | | | | |
| Delaware | | | | | | | | |
| Elk | | | | | | | | |
| Erie | | | | | | | | |
| Fayette | | | | | | | | |
| Forest | | | | | | | | |
| Franklin | | | | | | | | |
| Fulton | | | | | | | | |
| Greene | | | | | | | | |
| | | | | | | | | |
| Huntingdon | | | | | | | | |
| Indiana | | | | | | | | |
| Jefferson | | | | I | | | | |
| Juniata | | | | | | | | |
| Lackawanna | | | | | | | | |
| Lancaster | | | | | | | | |
| Lawrence | | | | | | | | |
| Lebanon | | | | | | | | |
| Lehigh | | | | | | | | |
| Luzerne | | | | | | | | |
| Lycoming | | | | | | | | |

| McKean | | | |
|----------------|--|--|--|
| Mercer | | | |
| Mifflin | | | |
| Monroe | | | |
| Montgomery | | | |
| Montour | | | |
| Northampton | | | |
| Northumberland | | | |
| Perry | | | |
| Philadelphia | | | |
| Pike | | | |
| Potter | | | |
| Schuylkill | | | |
| Snyder | | | |
| Somerset | | | |
| Sullivan | | | |
| Susquehanna | | | |
| Tioga | | | |
| Union | | | |
| Venango | | | |
| Warren | | | |
| Washington | | | |
| Wayne | | | |
| Westmoreland | | | |
| Wyoming | | | |
| York | | | |
| | | | |
| Total | | | |

Country of Manufacture Calendar Year Ending: Pipeline Operator:

Please check here if you have no lines installed in the previous calendar year \Box

Please report mileage to the nearest 1/10th of a mile

| Country of Manufacture | Length of tubular steel products | Material Test Report (yes/no) | | | |
|------------------------|-------------------------------------|----------------------------------|----|--|--|
| | | Yes | No | | |
| | | | | | |
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| Total | | | | | |