

Act 127 Pennsylvania Pipeline Operator Annual Registration Form

| | Please sub | omit completed form by March 31 |
|------|---|--|
| Deel | vietretien fer Drewieue Celender Veer Frdin | |
| | gistration for Previous Calendar Year Endin cket Number: | ig. |
| | bu need help getting your docket number, | |
| • | Go to <u>www.puc.pa.gov</u> > Filing & Resour On the Act 127 page you will see a link or Click on the link to "View Current List of R Click on the utility code next to your name | e; find the Docket Number (A- 2012 -xxxxx) under the Docketed Cases. |
| 1. | Registrant (Full name of pipeline operate | or): |
| | mments: If applicable, explain any changes to t calendar year. | your company name or legal status (acquisition, merger, etc.) in the |
| | | |
| 2. | Types of Pipelines and/or Facilities.Please note that natural gas public utilitiPipelines and/or facilities covered by ttransport the following types of commodGas Distribution | his form are associated with the following types of facilities and |
| | | Propane Gas |
| | | |
| | Gas Transmission | |
| | Natural Gas | |
| | Propane Gas | |
| | Other Gas | Define: |
| | | ٦ |
| | Gas Gathering | <u>_</u> |
| | Hazardous Liquid Cher | Define: |
| | | |
| 3. | | ission will serve all correspondence relating to this registration. |
| | Street Address/P. O. Box: City, State, Zip Code: | |
| | | |
| 4. | perform inspections and onsite visits. Do not provide a post office box number | nnsylvania facility. This address is needed by the Commission to r <u>.</u> |
| | Street Address: | |
| | City, State, Zip Code: | |
| 5. | US DOT Operator ID Number: Provide the number assigned to you by Department of Transportation, Pipeline F Materials Safety Administration (PHMSA | Hazardous and |
| 6. | PA L&I Propane Registration Number: Provide your propane registration numb Pennsylvania Department of Labor and I If you do not have a number, please enter | Industry (if applicable). |

| 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 g | | | | | | |
|---|--|--|--|--|--|--|
| mileage in operation as of December 31 of the prior year, by class and by county. Mileage should be reported for each individual pipe. Multiple pipelines in one trench are considered individual pipes for reporting purposes. If you | | | | | | |
| have no miles to report on these attachments, check the app | | | | | | |
| Complete Attachment "C" by providing the country of manufacture and mileage data for all tubular steel products installed in the prior calendar year in Pennsylvania for the exploration, gathering or transmission of natural gas or hazardous liquids. If you have no data to report on this attachment, check the appropriate block at the top of the form. | | | | | | |
| | iment, check the appropriate block at the top of the form. | | | | | |
| 13. Filing Fee: | | | | | | |
| The filing fee for this Annual Registration Form is \$250, paya The filing fee can either be mailed or electronically paid when eF NOTE: If you are a Propane Distributor registered with the P | ling your form with the Commission's eFiling system. | | | | | |
| filing fee. | t zar or a Borough, you are exemptinent paying the | | | | | |
| | | | | | | |
| Fee Exemptions (please indicate if either exemption app Propane Distributor registered with PA L&I | | | | | | |
| Borough | | | | | | |
| Dorodgii | | | | | | |
| 14. Verification: | | | | | | |
| The person responsible (corporate officer or attorney) for fill her signature and verify that all information provided on the | form is true to the best of his or her knowledge, | | | | | |
| information and belief. <u>NOTE: Registration Forms that are n</u> | ot verified will not be accepted for filing. | | | | | |
| I hereby state that the information in this application is true and c | orrect to the best of my knowledge, information and | | | | | |
| belief. I understand that the statements herein are made subject | | | | | | |
| unsworn falsification to authorities). | | | | | | |
| | | | | | | |
| Name: | Signature: | | | | | |
| | | | | | | |
| | L GK | | | | | |
| | □ QK | | | | | |
| Title: | Date: | | | | | |
| | □ QK | | | | | |
| Title: 15. Registration: | □ QK | | | | | |
| Title: 15. Registration: eFiling: | Date: | | | | | |
| Title: 15. Registration: | Date: | | | | | |
| Title: 15. Registration: eFiling: Registration Forms may be eFiled with the PUC. If eFilin | Date: | | | | | |
| Title: Title: IS. Registration: eFiling: Registration Forms may be eFiled with the PUC. If eFilin 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: | Date: g your renewal form, go to <u>http://www.puc.pa.gov</u> and News & Reports. Please choose "Existing Case" as the | | | | | |
| Title: Title: 15. Registration: eFiling: Registration Forms may be eFiled with the PUC. If eFilin 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 | Date: g your renewal form, go to <u>http://www.puc.pa.gov</u> and News & Reports. Please choose "Existing Case" as the | | | | | |
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| Title: Title: Intersection Forms eFiling: Registration Forms may be eFiled with the PUC. If eFilin 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 | Date: g your renewal form, go to <u>http://www.puc.pa.gov</u> and News & Reports. Please choose "Existing Case" as the | | | | | |
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| Title: Title: It is the responsibility of registration: It is the responsibility of registrants to keep the Com | Date: g your renewal form, go to <u>http://www.puc.pa.gov</u> and News & Reports. Please choose "Existing Case" as the attachments and filing fee (if applicable) to: mission notified of any changes to your contact | | | | | |
| Title: Title: It is the responsibility of registration forms may be eFiled with the PUC. If eFilin 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 Com information by providing notice, in writing, to the Co • Incomplete registration forms or those missing any a delayed for processing until the required information | Date: g your renewal form, go to http://www.puc.pa.gov and News & Reports. Please choose "Existing Case" as the attachments and filing fee (if applicable) to: mission notified of any changes to your contact mmission's Secretary at the above address. mission notified of any changes to your contact mmission's Secretary at the above address. attachments are unacceptable for filing and will be a is sent to the Commission's Secretary's Bureau. If | | | | | |
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| Title: Title: It is the responsibility of registration forms may be eFiled with the PUC. If eFilin 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 Com information by providing notice, in writing, to the Co • Incomplete registration forms or those missing any a delayed for processing until the required information | Date: g your renewal form, go to http://www.puc.pa.gov and News & Reports. Please choose "Existing Case" as the attachments and filing fee (if applicable) to: mission notified of any changes to your contact mmission's Secretary at the above address. Attachments are unacceptable for filing and will be is sent to the Commission's Secretary's Bureau. If pleting this form, call 717-772-7777. OT place social security numbers, credit card | | | | | |
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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

| | Intrastate Interstate | | | | |
|------------|-----------------------|-----|---------|-----|-------|
| 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.

| | | | | | Gathering, Transmission & Distribution | | | ution |
|------------|------------------------------|--|--|--|---|---|---|---|
| | 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 | | | | | |