REQUEST FOR 24 MONTH HISTORY FORM

		(Principal), the customer of record for the below listed
account(s) with	n The Peoples Gas L	ight and Coke Company or North Shore Gas Company hereby
appoints and a	uthorizes	(Agent), having a business
address of		as Principal's duly authorized agent to
request and rec	ceive from Company	available information regarding consumption history.
*Meter No.	*Account No.	Service Address
· Meter No.	Account No.	Service Address
* Required infor	mation	
☐ See attached p	age for additional accou	nt numbers and addresses
1		Customer Information:
Pri	ncipal:	Customer information.
Sig	nature:	
Pri	nted Name:	
(If di	fferent from Principal)	<u></u>
	e:	
Tel	ephone	
	:	Requesting Supplier Information
Naı	ne:	