APPENDIX B

Gas Transmission Northwest Corporation
Pacific Express User Access Form

☐ Add	☐ Change	☐ Delete

Organization Information

Company	DUNS#

User Information

Name	e-mail
Title	IM Address
Address	
City	State/Province	Zip/Postal Code
Phone Number	Fax Number

Security Word: Please **select one** of the categories below and provide a unique "security word" relating to that category which is known only to you. As a security measure to protect both parties interests, please provide this word when requesting any changes or information about your account:

Mother's Maiden Name:	City of Birth:	Pet's Name:	Specify Security Word:

Hardware/Software Information

Operating System	☐ Windows NT	☐ Windows XP	☐ Other:
Browser	☐ Internet Explorer (recommended)	☐ Netscape Navigator 4.__	☐ Other:
Internet Access	☐ Dial Up	☐ Direct connection	

System Access: (please check all that apply)

☐	Ability to input nominations. ***After hours phone number required:***
☐	Ability to post/bid on Capacity Release transactions
☐	Ability to create and/or modify contracts
☐	Read Only
☐	Ability to view billing invoices online
☐	Ability to receive **hard-copy** billing invoices by **mail**

_____ User's Signature	_____ Supervisor's Signature

Access request must be signed by both the User requesting access and a Supervisor.

AFTER COMPLETING THIS FORM PLEASE RETURN VIA FAX AT 503-833-4330

TO BE COMPLETED BY GAS TRANSMISSION NORTHWEST CORPORATION

User ID:	Password:
Completed by:	Date: