MASTER METER DETERMINATION FORM

This form is to be used during initial field inspection activity

Master Meter Company Name: Radar Farms, Inc Cabins ID #: 918 Comments: 6-13-2011 conducted final follow up. Observed individual meters at each Cabins. This is not a master meter system or potential SGS Business Mailling Address: Name (Mr./Ms.): Carol VanRy Company Name: Rader Farms, Inc Cab ins Address: 8974 Line Rd City: Lynden Zip: 98264 Correspondence Copy Address (if required): Name (Mr./Ms.): NA Company Name: [Type Text] Name (Mr./Ms.): Type Text] Name (Mr./Ms.): Type Text] City: Type Text] City: Type Text] Zip: [Type Text] 1. For each piece of natural gas equipment ask the following questions: a. When a tenant/guest turns a knob/thermostat/faucet, what was turned on? NA Gas to create a product, (i.e. gas fireplace, furnace/wall heater, cook stove, individual water heater) NA Product (i.e. radiant heat, hot water b. Who uses and controls the gas? (not the product of the gas) NA Owner NA Tenant/Guest 2. This determines the end user. a) If the end user, for all gas equipment is the master meter facility owner, the facility is NOT a master meter NA End user is the facility owner NA End user is the facility owner NA End user is the Tenant/Guest b) If the end user is the tenant/guest, answer the following: i) Does the end user pay for the gas used? (Direct resale)	Inspe	ector Na	ame: P Johnson		Inspection Visit Date: 6-13-2011
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		b)		Ų ,	
ii) Does the end user pay rent? (Indirect resale)		b)	i) Does the end NA Yes	I user pay for the gas used? (Direct NA No	

3. This determines the direct or indirect resale of the gas.

the tenant/guest?

NA No

NA No

NA Yes

NA Yes

iii)

a) If **NA** no compensation from the tenant/guest is made to the owner, this is <u>NOT a master meter</u>.

Does any type of compensation or financial benefit take place to the owner directly from

¹ If facility is determined to be a Master Meter, a docket number will be assigned for the actual inspection, and work plan will be updated.