|  |  |
| --- | --- |
| (T) |  |
|  |  |
|  |  |
| (T) |  |
|  |  |
|  |  |
|  |  |
| (D) | (T) |
| I |  |
| I |  |
| (D) |  |
|  |  |
|  |  |
|  |  |
|  |  |
|  |  |
|  |  |
|  |  |
|  |  |
|  |  |
|  |  |
|  |  |
|  |  |
|  |  |
|  |  |
|  |  |
|  |  |
|  |  |
|  |  |
|  |  |
|  |  |
|  |  |
|  |  |
|  |  |
|  |  |

|  |
| --- |
| SCHEDULE NO. 50 |
| Emergency Compressed Natural Gas Service (Continued) |

1. **Billing:** Billing each month will be for all natural gas metered and validated as delivered by the Company during the month. Gas delivered prior to execution of the service agreement required in Section 1 above will be included in billing for the month.
2. **General Rules and Regulations:** Except as otherwise indicated in this schedule, service under this schedule is subject to the rules and regulations contained in the Company’s tariff.