

NEBRASKA PUBLIC SERVICE COMMISSION

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JEFF PURSLEY

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1-800-526-0017

APPLICATION TO CHANGE NAME

All jurisdictional utilities and competitive natural gas providers (CNGPs) certificated by the Nebraska Public Service Commission shall provide an application and filing fee as set forth below in order to change the name under which services are provided.

The following is for informational purposes only, and intended only to assist Applicants in the completion of their application. If any difference exists between this form and any law, regulation or case law, then such law, regulation or case law shall control.

Applicants seeking approval of a name change shall submit an **original and eight (8) copies of the application** to the Commission to the address below. CNGPs/Aggregators should include a **\$125 application fee**. Jurisdictional utilities need not include a fee as costs will be directly assessed to them.

Executive Director
Nebraska Public Service Commission
300 The Atrium, 1200 N Street
P.O. Box 94927
Lincoln, NE 68509-4927

The application fee is required to cover the administrative costs of accepting and processing a filing. In addition, each Applicant may be assessed additional costs and expenses reasonably attributable to the application consistent with Neb. Rev. Stat. § 66-1840. Notice of the application will be published in the Daily Record, Omaha, Nebraska.

Applicants **must notify** the Commission during the pendency of the certification request of any material change in the representations and commitments required by this subsection **within 14 days** of such change.

Questions should be directed to the Director of the Natural Gas Department of the Nebraska Public Service Commission at (402) 471-3101.

Provider Holding Authority:	
Current Company Name:	
Any d/b/a of Company:	
Docket No. and Date Authority Granted:	
Any Name Company previously provided Service Under and Associated Docket Nos.:	
Proposed Name Change:	
Date Proposed Name Approved by Secretary of State:	
Any changes to d/b/a of Company:	

Provide any changes to contact information, if any:	
Contact Name (Regulatory):	
Address:	
Telephone No.:	
Fax No.:	
E-mail Address:	
Contact Name (Legal):	
Address:	
Telephone No.:	
Fax No.:	
E-mail Address:	

Questions Regarding Application should be directed to:	
Name:	
Address:	
Telephone No.:	
Fax No.:	
E-mail Address:	

Other Information

Applicant *shall* attach evidence of authority to do business in Nebraska, certificates of registration by the Nebraska Secretary of State for all approved trade names under which the applicant will operate, and the applicant's state of incorporation and any further information that may assist the Commission in evaluating this application.

Signature of Applicant or Applicant's Attorney

Signature

Print Name

Title

Date

