

**VECTOR PIPELINE SYSTEM
QUICKNOM™ ACCESS AGREEMENT
SCHEDULE A**

COMPANY INFORMATION	
Company Name ("Shipper"):	
Company Mailing Address:	
Company Phone Number:	
Company Fax Number:	
AUTHORIZED SIGNATURE	
Name:	
Title:	
Signature:	
Date:	
AUTHORIZED PERSONNEL	
#1 Name "Subscriber Contact" (i.e. primary contact individual)	
Address:	
Phone Number:	
Fax Number:	
Email Address:	
Relationship to Subscriber: (i.e. employee, agent, etc.)	
Notifications:	<input type="checkbox"/> Curtailment <input type="checkbox"/> Scheduling <input type="checkbox"/> Critical <input type="checkbox"/> Capacity Release <input type="checkbox"/> Invoice <input type="checkbox"/> Marketing <input type="checkbox"/> Shipper <input type="checkbox"/> Credit
#2 Name:	
Address:	
Phone Number:	
Fax Number:	
Email Address:	
Relationship to Subscriber: (i.e. employee, agent, etc.)	
Notifications:	<input type="checkbox"/> Curtailment <input type="checkbox"/> Scheduling <input type="checkbox"/> Critical <input type="checkbox"/> Capacity Release <input type="checkbox"/> Invoice <input type="checkbox"/> Marketing <input type="checkbox"/> Shipper <input type="checkbox"/> Credit

