



*Serving Communities in Lawrence, Richland and Jasper Counties*

I request Illinois Gas Company to maintain the gas service at my rental properties listed in my name when tenants move out.

Date \_\_\_\_\_

Print Name: \_\_\_\_\_ # \_\_\_\_\_

Mailing Address \_\_\_\_\_  
\_\_\_\_\_

Phone Number: \_\_\_\_\_ Cell Number: \_\_\_\_\_

**TRANSFER SERVICE INTO MY NAME DURING THE FOLLOWING MONTHS ONLY.**

Month \_\_\_\_\_ To Month \_\_\_\_\_

Example October 15, to April 15, other months not specified gas service will be terminated.

**SIGNATURE:** \_\_\_\_\_

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**I DO NOT** want Illinois Gas Company to automatically transfer service into my name when tenants move out.

**SIGNATURE:** \_\_\_\_\_

Please list all properties by addresses:

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_