

**For Peoples Gas Use Only**

<input type="checkbox"/>	Date Received _____
<input type="checkbox"/>	Date Accepted/Processed _____
<input type="checkbox"/>	Date Denied _____ (See Below for Reasons Denied)

## SERVICE PIPE DISCONNECT REQUEST

Peoples Gas will charge a flat fee of \$750 per service pipe disconnect in conjunction with building tear-downs. The pre-payment fee of \$750 is required to process your request. Failure to notify the Company prior to demolition may result in the assessment of additional fees including damage to property, lost meter and emergency service fees. In order to assist you in planning for demolition projects, we have outlined the process below. For questions, please call 312-240-4332, 312-240-4225 or 312-240-4164.

### Instructions for Processing Service Pipe Disconnect Requests

1. Requests must be received 10 to 15 business days prior to the scheduled demolition date. Complete the form below, sign and fax to 312-240-7221.
2. A pre-payment fee of \$750.00 must be paid by check or money order payable to "Peoples Gas." Please mail payments to:
3. Payments also may be made at one of our authorized payment locations.
4. Send any questions to [servicepipedesk@integrysgroup.com](mailto:servicepipedesk@integrysgroup.com).

Peoples Gas  
 Payment Processing  
**Attention: Contracts**  
 130 East Randolph Street, 17th Fl.  
 Chicago, Illinois 60601

#### SERVICE PIPE DISCONNECT INFORMATION (To be completed by Requesting Company)

Customer Non-Utility Account No.	Federal ID No. / Personal Social Security No.	Date Disconnection Needed
Company Requesting Disconnect		Address of Structure to Be Demolished
Contact Person		
Address		Property Owner or General Contractor Name
City/Town/State/Zip		Contact Person Phone No.
Phone	Fax	Address
Email		City, State, Zip
Description of Structure to be Demolished		
The undersigned (hereinafter called "Customer") hereby requests that Peoples Gas (hereinafter called the "Company") disconnect gas service at the above-referenced address for purpose of demolition. Customer hereby agrees to pay the Company for such work at the contract price.		
Customer Signature		Date

#### For Peoples Gas Use Only: Reason Denied

<input type="checkbox"/> Outstanding balance due \$ _____	<input type="checkbox"/> Need access to remove meter _____
Pay on Account No. _____	<input type="checkbox"/> No such address _____
<input type="checkbox"/> Active accounts contact 866-556-6001 _____	<input type="checkbox"/> Other _____

Entered By: \_\_\_\_\_ Date Entered: \_\_\_\_\_