INTERMOUNTAIN® GAS COMPANY
A Subsidiary of MDU Resources Group, Inc.
In the Community to Serve®

EXHIBIT B
CONTINUOUS SERVICE AGREEMENT AUTHORIZATION

Scan and return via
- Email: *customerservice@intgas.com*
- Fax: 208-377-6081
- Mail: Intermountain Gas Company, Attn: Customer Support, P.O. Box 7608, Boise, ID 83707-1608

The Undersigned authorizes the agent designated below to act as personal representative, on their behalf, with regard to a Continuous Service Agreement entered into between the Customer and the Utility.

The Undersigned authorizes the persons or entities identified below: (1) To be party to information regarding the Agreement and account information pertaining to real properties described on the Agreement. (2) To provide **PRIOR WRITTEN NOTICE** to the Utility of any changes to telephone number, mailing address, Email address or additions and deletions to properties described on the Agreement. (3) To start and stop Gas Services for real properties described on the Agreement.

(* An asterisk indicates that the information is required for processing.)

*Name of authorized Property Management Company (Complete if applicable):			
*Name of Authorized Person(s):			
Social Security Number:		Business Tax ID Number:	
*Address:			
*City:	*State:	*Zip:	
*Primary Contact Phone:	Cell Phone:	Fax Number:	Email Address:

I hereby affirm that I am the Financially Responsible Party (i.e. owner, manager, or otherwise financially responsible) for the real properties described on Exhibit A and authorize the aforementioned person or entities to act on my behalf regarding all aspects of the Continuous Service Agreement.

Customer Printed Name: _____

Signature: _____ Date: _____

FOR OFFICE USE ONLY

CSA ID# Processed by: Date: