

ATTACHMENT B

**Form For
Short-Term Firm and Non-Firm Point-To-Point Service Agreement**

- 1.0 This Service Agreement, dated as of _____, is entered into, by and between Nova Scotia Power Incorporated (the Transmission Provider), and _____ (the Transmission Customer).
- 2.0 The Transmission Customer has been determined by the Transmission Provider to be a Transmission Customer under Part II of the Tariff and has filed a Completed Application for Short-Term Firm or Non-Firm Point-To-Point Transmission Service in accordance with Sections 17.2 and 18.2 of the Tariff.
- 3.0 Service under this Agreement shall be provided by the Transmission Provider upon request by an authorized representative of the Transmission Customer.
- 4.0 The Transmission Customer agrees to supply information the Transmission Provider deems reasonably necessary in accordance with Good Utility Practice in order for it to provide the requested service.
- 5.0 The Transmission Provider agrees to provide and the Transmission Customer agrees to take and pay for Short-Term Firm or Non-Firm Point-To-Point Transmission Service in accordance with the provisions of Part II of the Tariff and this Service Agreement.
- 6.0 Any notice or request made to or by either Party regarding this Service Agreement shall be made to the representative of the other Party as indicated below.

Open Access Transmission Tariff

Transmission Provider:

Nova Scotia Power Inc.
PO Box 910
Halifax, NS B3J 2W5
Attn: Alison Gillan, Manager, Open Access Transmission

Transmission Customer:

Company Name: _____

Billing Contact: _____

Address: _____

Telephone: _____

Fax: _____

E-mail _____

TSIN Code _____

TSIN DUNS _____

Administrative Contact: _____

Address: _____

Telephone: _____

Fax: _____

E-mail _____

7.0 The Tariff is incorporated herein and made a part hereof.

IN WITNESS WHEREOF, the Parties have caused this Service Agreement to be executed by their respective authorized officials.

Transmission Provider:

By: _____
Name Title Date

Transmission Customer:

By: _____
Name Title Date