

OFFICIAL FILE

C.C. DOCKET NO. 04-0732

RB Exhibit No. 18

Witness _____

Date 11/1/05 Recorder lji

Customer Meter Form

Address 9353 S. Cottage ^{STO} Floor 1989449

Customer Name _____ Meter # _____ Job Code _____

Comments FOUND ON 9353 STO

Arrival Date _____ Completion Date _____
Arrival Time _____ Completion Time _____ Emp # _____

Completion Remarks STOLEN FROM 9326

Completion Code:

- | | | |
|---|--|---|
| <input type="checkbox"/> Complete | <input type="checkbox"/> Customer Premise Vacant | <input type="checkbox"/> Lost Meter |
| <input type="checkbox"/> Previously Complete | <input type="checkbox"/> Customer Refused Entry | <input type="checkbox"/> Lost Meter/New Set |
| <input type="checkbox"/> No Response | <input type="checkbox"/> Leak in House Piping | <input type="checkbox"/> Crossed Meters |
| <input type="checkbox"/> No Access to Meter | <input type="checkbox"/> Theft | <input type="checkbox"/> Different Meter |
| <input type="checkbox"/> No Access to Appliance | <input type="checkbox"/> Other/See Remarks | |

Present Meter (Turn-On) Found Status:

- | | | |
|--|---|---|
| <input type="checkbox"/> Cut-Off at Main | <input type="checkbox"/> Meter Removed | <input type="checkbox"/> Broken Lock |
| <input type="checkbox"/> Cut-Off Between Main & Building | <input type="checkbox"/> Off at B-Box | <input type="checkbox"/> On |
| <input type="checkbox"/> Disc'd & Locked | <input type="checkbox"/> Off at B-Box & Plugged | <input type="checkbox"/> Rear House Off Inside Front Bldg |
| <input type="checkbox"/> Meter Locked | <input type="checkbox"/> Off at Riser | <input type="checkbox"/> Special Plug |
- Current Read _____

Present Meter (Cut-Off/Remove) Left Status:

- | | | |
|--|---|---|
| <input type="checkbox"/> Cut-Off at Main | <input checked="" type="checkbox"/> Meter Removed | <input type="checkbox"/> Broken Lock |
| <input type="checkbox"/> Cut-Off Between Main & Building | <input type="checkbox"/> Off at B-Box | <input type="checkbox"/> On |
| <input type="checkbox"/> Disc'd & Locked | <input type="checkbox"/> Off at B-Box & Plugged | <input type="checkbox"/> Rear House Off Inside Front Bldg |
| <input type="checkbox"/> Meter Locked | <input type="checkbox"/> Off at Riser | <input type="checkbox"/> Special Plug |
- Current Read 441A

New Meter (Set/Change) Left Status:

- | | | |
|--|---|---|
| <input type="checkbox"/> Cut-Off at Main | <input type="checkbox"/> Meter Removed | <input type="checkbox"/> Broken Lock |
| <input type="checkbox"/> Cut-Off Between Main & Building | <input type="checkbox"/> Off at B-Box | <input type="checkbox"/> On |
| <input type="checkbox"/> Disc'd & Locked | <input type="checkbox"/> Off at B-Box & Plugged | <input type="checkbox"/> Rear House Off Inside Front Bldg |
| <input type="checkbox"/> Meter Locked | <input type="checkbox"/> Off at Riser | <input type="checkbox"/> Special Plug |
- Meter # _____ Meter Location _____ Current Read _____

Appliances Lit:

- | | |
|---|---|
| <input type="checkbox"/> Range _____ Qty | <input type="checkbox"/> Space Heater _____ Qty |
| <input type="checkbox"/> Central Heating Plant _____ | <input type="checkbox"/> Boiler _____ |
| <input type="checkbox"/> Automatic Water Heater _____ | <input type="checkbox"/> Other _____ |

Flue OK?

- Yes
 No

Appliances Inspected:

- | | |
|---|---|
| <input type="checkbox"/> Range _____ Qty | <input type="checkbox"/> Space Heater _____ Qty |
| <input type="checkbox"/> Central Heating Plant _____ | <input type="checkbox"/> Boiler _____ |
| <input type="checkbox"/> Automatic Water Heater _____ | <input type="checkbox"/> Other _____ |

Flue OK?

- Yes
 No

Appliances to be Connected:

- | | |
|---|---|
| <input type="checkbox"/> Range _____ Qty | <input type="checkbox"/> Space Heater _____ Qty |
| <input type="checkbox"/> Central Heating Plant _____ | <input type="checkbox"/> Boiler _____ |
| <input type="checkbox"/> Automatic Water Heater _____ | <input type="checkbox"/> Other _____ |

House Piping OK?

- Yes No N/A

Outside Wall OK?

- Yes No N/A

Company Service OK?

- Yes No N/A

Bypass Valve OK?

- Yes No N/A

Meter Impression

1989449

Signature _____