

**El Paso Natural Gas Company, L.L.C.**

**Return this Form and Financial Statements to:**

**Pipeline Group Finance**

1001 Louisiana Street, Houston, TX 77002

**Fax: (713) 445-9132**

**Email: Ted\_Chavez@KinderMorgan.com**

**CREDIT APPLICATION & REQUIRED INFORMATION**

**Instructions:** Please return this completed credit application (via facsimile or email) with your company's most recent annual audited financial statements (or Form 10-K) and the most recent interim statement to the fax or email addresses listed above. Please note **we cannot process your application** without financial statements from the party requesting transportation service. Should you have questions, contact Ted Chavez at (713) 420-3068.

**Company Information**

Date: \_\_\_\_\_

Legal Name: \_\_\_\_\_

Address: \_\_\_\_\_

Name of Acct. Payable Contact: \_\_\_\_\_ Phone: \_\_\_\_\_

Fax: \_\_\_\_\_ Email: \_\_\_\_\_

Name of Financial Officer: \_\_\_\_\_ Phone: \_\_\_\_\_

Fax: \_\_\_\_\_ Email: \_\_\_\_\_

**Classification**

(check one)

\_\_\_ Private-Corporation

\_\_\_ Public-Corporation

\_\_\_ S-Corporation

\_\_\_ General-Partnership

\_\_\_ Limited-Partnership

\_\_\_ Sole Proprietor

\_\_\_ Governmental

\_\_\_ Limited Liability Corp.

\_\_\_ Nonprofit

Fiscal Year End: \_\_\_\_\_ D&B No: \_\_\_\_\_

**Description of Business Activity:** \_\_\_\_\_

**Officers and Controlling Shareholders**

(Complete only if a Nonpublic Company)

Name	Title	Ownership %
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____

**Parent Company**

Name: \_\_\_\_\_

Address: \_\_\_\_\_

D&B No.: \_\_\_\_\_ If necessary, will parent guarantee payment? \_\_\_ Yes \_\_\_ No

**CREDIT INFORMATION (Continued)**

**Trade References**

**Company/Address**

**Phone/Contact Person**

1. Company: \_\_\_\_\_ Phone: \_\_\_\_\_  
Address: \_\_\_\_\_ Fax No: \_\_\_\_\_  
City, State, Zip: \_\_\_\_\_ Contact Person: \_\_\_\_\_
  
2. Company: \_\_\_\_\_ Phone: \_\_\_\_\_  
Address: \_\_\_\_\_ Fax No: \_\_\_\_\_  
City, State, Zip: \_\_\_\_\_ Contact Person: \_\_\_\_\_
  
3. Company: \_\_\_\_\_ Phone: \_\_\_\_\_  
Address: \_\_\_\_\_ Fax No: \_\_\_\_\_  
City, State, Zip: \_\_\_\_\_ Contact Person: \_\_\_\_\_
  
4. Company: \_\_\_\_\_ Phone: \_\_\_\_\_  
Address: \_\_\_\_\_ Fax No: \_\_\_\_\_  
City, State, Zip: \_\_\_\_\_ Contact Person: \_\_\_\_\_

**Bank References**

Name: \_\_\_\_\_  
Address: \_\_\_\_\_  
\_\_\_\_\_  
Contact: \_\_\_\_\_  
Phone: \_\_\_\_\_ Fax: \_\_\_\_\_

1. We hereby authorize El Paso Natural Gas Company, L.L.C. to obtain or exchange any information that may be required relative to this Application from any source, including Applicant's financial institutions, trade suppliers, and credit information databases. Applicant authorizes each source to provide such information.

2. The undersigned Applicant certifies that the information supplied on this Credit Application ("Application") is accurate and correct as of the date of this Application.

By: \_\_\_\_\_  
Applicant's Signature

Name: \_\_\_\_\_  
Title: \_\_\_\_\_  
Date: \_\_\_\_\_