



# PUBLIC UTILITY FEE REPORT – GAS UTILITIES FILING CLASS A-B REPORTS

State Form 50494 (R11 / 1-18)  
INDIANA UTILITY REGULATORY COMMISSION

CALENDAR YEAR 2017

Utility Identification Number: \_\_\_\_\_  
 Utility Name: \_\_\_\_\_  
 Street Address (number and street): \_\_\_\_\_  
 City/State/ZIP: \_\_\_\_\_  
 Telephone Number: ( ) \_\_\_\_\_

ACCOUNT NUMBER	ACCOUNT TITLE	TOTAL OPERATING REVENUE	TOTAL INTRA-STATE REVENUE
480	Residential Sales	_____	_____
481	Commercial And Industrial Sales	_____	_____
482	Other Sales To Public Authorities	_____	_____
483	Sales For Resale	_____	_____
484	Interdepartmental Sales	_____	_____
487	Forfeited Discounts	_____	_____
488	Miscellaneous Service Revenues	_____	_____
489	Revenues From Transportation Of Gas Of Others	_____	_____
490	Sales Of Products Extracted From Natural Gas	_____	_____
491	Revenues From Natural Gas Processed By Others	_____	_____
492	Incidental Gasoline And Oil Sales	_____	_____
493	Rent From Gas Property	_____	_____
494	Interdepartmental Rents	_____	_____
495	Other Gas Revenues	_____	_____
904	Uncollectible Accounts - Debit	_____	_____
<b>TOTAL</b>		_____	_____

I certify that the foregoing information is accurate and is in agreement with the books and records of the utility for the year ended December 31, 2017.

Signature: \_\_\_\_\_  
 Printed Name: \_\_\_\_\_  
 Title: \_\_\_\_\_  
 Telephone Number: ( ) \_\_\_\_\_

**Address to send fee bill to (if different than above):**

Name: \_\_\_\_\_  
 Business Name: \_\_\_\_\_  
 Street Address (number and street): \_\_\_\_\_  
 City/State/ZIP: \_\_\_\_\_  
 Telephone Number: ( ) \_\_\_\_\_

**Return completed forms to:**

IURC  
 101 W. Washington St., Suite 1500-E  
 Indianapolis, IN 46204  
 Fax: (317) 232-6758  
 E-mail: [feebilling@urc.in.gov](mailto:feebilling@urc.in.gov)