

Unclaimed Funds Request

In order for Pacific Northern Gas to verify your identity, please provide copies of at least 2 forms of identification, preferably those used in previous transactions with PNG. Examples are SIN, Driver's Licence, BC ID. To expedite the claim process a copy of a bill for service issued by PNG in your name would also be helpful. This information, and the information below will provide PNG with the necessary documentation to issue these funds to you.

Request for Unclaimed Funds (must be completed for all requests)	
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<i>Payee Name</i>	<i>Cheque Issue Date (YY/MMM/DD)</i>
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Information About Yourself (must be completed for all requests)			
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<i>Requester Last Name</i>	<i>First Name</i>	<i>Initial</i>	<i>Date of Birth (YY/MMM/DD)</i>
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<i>Current Street Address</i>	<i>City</i>	<i>Province</i>	<i>Postal Code</i>
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<i>Current Mailing Address (if different than above)</i>	<i>City</i>	<i>Province</i>	<i>Postal Code</i>
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<i>Home Telephone</i>	<i>Cell Phone Number</i>	<i>Email Address (Confirmation will be emailed to you)</i>
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COMPLETE THE APPLICABLE SECTION (1, 2, OR 3) BELOW

1. Account Information (if your request is related to a previous PNG gas account)		
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<i>Previous PNG Account Number</i>	<i>Date Account Closed (YY/MMM/DD)</i>	<i>Current PNG Account Number (if applicable)</i>
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<i>Previous Gas Account Service Address</i>	<i>City</i>	<i>Province</i>	<i>Postal Code</i>
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<i>Previous Gas Account Mailing Address</i>	<i>City</i>	<i>Province</i>	<i>Postal Code</i>
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2. Other Personal Information (if your request is on behalf of another person (i.e. estate of deceased))			
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<i>Payee Last Name</i>	<i>Payee First Name</i>	<i>Initial</i>	<i>Payee Date of Birth (YY/MMM/DD)</i>
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<i>Payee Street Address</i>	<i>City</i>	<i>Province</i>	<i>Postal Code</i>
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<i>Home Telephone</i>	<i>Cell Phone Number</i>	<i>Your Relationship to Payee</i>
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3. Vendor Information (if your request is on behalf of vendor, contractor or supplier)	
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<i>Company Name</i>	<i>Your Position in the Company</i>
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<i>Company Street Address</i>	<i>City</i>	<i>Province</i>	<i>Postal Code</i>
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<i>Company Telephone Number</i>	<i>Type of Business and additional information</i>
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Certification (must be completed for all requests)

I declare that this Request and the enclosed documents are, to the best of my knowledge, complete, accurate, and true. I believe that I am legally entitled to the Unclaimed Funds.

Signature

Date (YY/MMM/DD)

Privacy Protection

The personal information provided will be used to determine the rightful owner of the Unclaimed Funds and is provided voluntarily by the person filing this request. It is used for the sole purpose of making payments and/or administering requests under the authority of the Unclaimed Property Act of BC. This personal information will be protected in accordance with the terms Pacific Northern Gas' Privacy Policy. To view the Policy, you can visit our website at www.png.ca/privacy-policy.

Submit this request and attachments by mail to:

**Customer Service
Pacific Northern Gas
2900 Kerr Street
Terrace, BC V8G 4L9**

OR, by email to: unclaimedfunds@png.ca

Before you mail your application, please ensure you have:

- Completed **all** areas of the **Information About Yourself** section.
- Completed **all** areas of the applicable section (1, 2 or 3).
- Signed** and **dated** the application.
- Enclosed copies of at least two (2) forms of **identification** (e.g. Driver's Licence, SIN, BC ID).
- Enclosed a copy of a PNG bill for the account you are claiming for, if applicable.