REQUIREMENTS FOR SURETY BOND

1. Bond number assigned by insurance company

2. *****Years of Coverage requirements by state for bond:**

   Three (3) year requirement for NY
   Two (2) year requirement for NJ
   One (1) year requirement for PA

   ***** Surety Bond will be required longer if account is paid late.**

3. Name of the principal (customer)
4. Name of surety (insurance company)
5. Amount of the bond
6. Address of the Orange & Rockland account
7. Orange & Rockland account number(s)
8. Title & address of person notice of cancellation should be sent to:

   Orange & Rockland Utilities Inc
   Attn: Customer Support Operations
   390 W Route 59
   Spring Valley NY 10977

9. Day of the Month
10. Year
11. Name of surety, address & telephone number (insurance company)
12. Printed name and signature of authorized officer
13. Name of principal (customer)
14. Printed name and signature of an officer of the customer's company
15. Signature of principal (customer)

SURETY SOLUTIONS

EXHIBIT A

Bond # (1) _____

Effective Date of Bond (2) _____

SURETY BOND

KNOW ALL MEN BY THESE PRESENTS, that we, _____(3)

As PRINCIPAL and _____(4), as SURETY acknowledge ourselves as jointly and severally bound unto Orange & Rockland Utilities Inc, (Orange & Rockland) in the amount of _____(5) for the payment of which the PRINCIPAL binds himself, their heirs, executors, administrators, successors, assigns or other legal representatives, and the SURETY binds itself, successor, or other legal representative.

Whereas the PRINCIPAL has entered into a contract with Orange & Rockland to receive from Orange & Rockland utility service at _____(6) , Orange & Rockland account # _____(7). The PRINCIPAL agrees to promptly pay the bills in accordance with Orange & Rockland's rules and Regulations.

If the PRINCIPAL pays all amounts that may at any time hereafter be due for utility services, including late payment charges or any other charges associated with the furnishing of utility services, then this obligation shall be void, otherwise it will remain in full force and effect.

This bond shall remain in **EFFECT FOR** 1 **YEARS**. Neither the SURETY nor the PRINCIPAL shall have the right to determine their liability until 1 years from the effective date of the bond.

At the end of the 1 **years**, SURETY may terminate its liability by giving notice via certified mail, addressed to 390 W Route 59, Spring Valley, NY 10977 _____(8), and stating that the effective date of the notice shall not be less than 30 days after the mailing date of the notice. Such notice shall not limit or terminate this agreement with respect to any indebtedness which arises prior to the effective date of such termination by the SURETY.

PRINCIPAL may be required to secure a deposit or deposit alternative at the expiration of this bond if PRINCIPAL has made a late payment within the most recent 36 month period, financial reports indicate the potential for PRINCIPAL to default on future debt, PRINCIPAL has filed for bankruptcy or reorganization, or PRINCIPAL has rendered a backbill with the last 12 months for previously unbilled charges for service that came through a tampered equipment.

Not withstanding the expiration date, if Orange & Rockland receives payment from the PRINCIPAL before the expiration date and within ninety (90) days immediately preceding the filing of a petition under section 547 of the Bankruptcy Code, and Orange & Rockland is ordered to return the payment by the Bankruptcy Judge, this bond shall be reinstated to cover the payment.

SURETY SOLUTIONS

In witness thereof, the PRINCIPAL and SURETY have executed and delivered this bond this _____(9) day of _____, _____.(10)

(11). _____
Surety Company – name, address & telephone number

(12) _____
Printed name & signature of authorized officer

13_____
Name of principal (customer)

(14) _____
Printed name & signature of an officer of the customer's company

(15) _____
Signature of principal (customer)

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