

Account Number *
Confirm Account Number *

Please enter your 10-digit account number. Please disregard the 11th digit at the end of your account number. Do not include any dashes or spaces.

Customer Name *

First Name

Last Name

☐ I verify this is the name on the account.

Email

Confirm Email

Service Address

Address Line 1

Address Line 2

City

State ZIP Code

County *

Household size (Adults and Children) *

Total annual gross household income for individuals 18 and over? *

Enter total

Must show whole annual value only; no commas or decimals. If you currently have no income, enter 0.

Do you currently receive Social Security or Social Security Insurance benefits? * ☐ Yes ☐ No

Are you currently enrolled in the Lifeline program? * ☐ Yes ☐ No

Lifeline is a federal benefit program that helps make communications services more affordable for eligible consumers.

I certify that the information and documentation that I provided are true and accurate to the best of my knowledge. * ☐ I agree

I understand that providing false or fraudulent information or documentation may disqualify me as a Low-Income Residential Customer and may result in de-enrollment or being barred from receiving these benefits from Nicor Gas in the future. * ☐ I agree

I understand I may be required to renew my eligibility as a Low-Income Residential Customer if requested by Nicor Gas in the future. * ☐ I agree

I agree to provide supporting documentation, such as to verify my income, if requested by Nicor Gas for verification or auditing purposes. * ☐ I agree

Signature *