

# DELEGATION FORM

TRANSPORTERS: ☐ Trailblazer Pipeline Company LLC  
☐ Rockies Express Pipeline, LLC

☐ Tallgrass Interstate Gas Transmission, LLC

ALL Firm/Interruptible Gas Transportation/Storage/Compression Agreement(s) ("Agreement(s)") or specific Agreement No. \_\_\_\_\_ dated \_\_\_\_\_, between Transporter and \_\_\_\_\_ (Principal).  
Principal hereby designates \_\_\_\_\_ as its Agent to perform certain obligations under the Agreement(s) for the sole purpose of performing the following Interactive Website responsibilities (check all that apply).

<input type="checkbox"/> Request Agreement(s)/Amendment(s)	<input type="checkbox"/> Submit Nominations	<input type="checkbox"/> Receive Invoices*
<input type="checkbox"/> Execute Agreement(s)/Amendments	<input type="checkbox"/> Capacity Release/Bidding	<input type="checkbox"/> Operator Confirmations
<input type="checkbox"/> Capacity Release/Create Offer	<input type="checkbox"/> Operator Point Inquiry**	<input type="checkbox"/> Flowing Gas/By Point**
<input type="checkbox"/> Flowing Gas/By Contract**	<input type="checkbox"/> Imbalance Trading	<input type="checkbox"/> LDC Reports

\*Invoices can not be viewed if the delegation is contract specific \_\_\_\_\_ (Principal needs to initial verifying you DO NOT want invoices to be contract specific)

\*\*List Telemetered Points: \_\_\_\_\_

\*\*List Contracts No(s): \_\_\_\_\_

Effective Start Date: \_\_\_\_\_ Effective start date must be the first day of a flow month. The executed delegation forms must be received by Transporter at least two (2) business days prior to the date that nominations are due.

End Date: \_\_\_\_\_ (must enter an end date)

Detailed description of other responsibilities being DELEGATED: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

By execution hereof, Agent accepts its designation and appointment as agent for Principal and agrees to act as agent for Principal in accordance with the terms hereof. Agent shall clearly specify it is acting on behalf of Principal in all actions taken in its role of Agent.

In lieu of the addresses set forth in the Agreement(s), all notices, invoices and correspondence concerning the above-mentioned delegated duties shall be directed to Agent at the following address:

Contact Person: \_\_\_\_\_ Address: \_\_\_\_\_  
Telephone: \_\_\_\_\_ Fax: \_\_\_\_\_

Principal shall remain liable to Transporter for all of its obligations as Shipper under the Agreement(s). Principal and Agent, each, hereby indemnify and hold Transporter harmless from any and all liabilities, losses, damages, expenses and other obligations of any nature whatsoever that Transporter may suffer as a result of any and all claims, demands, costs, attorney fees and judgments against Transporter resulting from Transporter's reliance on Agent, including but not limited to payment made by Transporter to Agent or actions taken by Transporter pursuant to Agent's actions or inaction under the Agreement(s).

Principal's designation and appointment of Agent may be terminated or canceled at any time by the Principal or Agent, but no such termination or cancellation shall be effective as to Transporter until such time as Transporter shall have received written notice thereof by the terminating or canceling party.

The parties acknowledge that receipt by Transporter of an executed delegation form transmitted by facsimile shall constitute a valid enforceable agreement and shall legally bind the parties accordingly.

\_\_\_\_\_  
(Principal Name) GID \_\_\_\_\_

By: \_\_\_\_\_

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

Title: \_\_\_\_\_  
(Must be authorized signature)

\_\_\_\_\_  
(Agent Name) GID \_\_\_\_\_

By: \_\_\_\_\_

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

Title: \_\_\_\_\_  
(Must be authorized signature)

## TO BE COMPLETED BY TRANSPORTER

Delegation Agreement No. \_\_\_\_\_