



Narragansett Electric

382

Month
MAY86

280 MELROSE ST
PROVIDENCE RI 02901
TEL 781-0100

Previous Bill
PAY04/28

370254.45
113680.29CR

From	To	Rate	Previous Reading	Present Reading	KWH used	Balance Due Description	Current Charges
APR30	MAY31	S 7	0	0	952079	LIGHTING INTEREST CHARGE	98859.20 3207.18
Your account number							Total Due
449 60100 8500000			Demand	Fuel factor per KWH		358640.54	
				0057000			

For service at PROV AREA

Supply no.

AVOID INTEREST PLEASE MAIL PAYMENT AT LEAST 3 DAYS BEFORE JUN 23, IN ORDER TO REACH OUR OFFICE BY THE NEXT BILLING.

FOR YOUR CONVENIENCE, ELECTRIC BILLS MAY BE PAID AT:

ROMA FOODS INC
285 ATWELLS AVE
PROVIDENCE, RI

IN CITY COUNCIL

JUN 19 1986

APPROVED:

Ram Mendonca CLERK

Detach here →

State sales tax included - when required

Please return this stub with your payment

53

MAY86

449 60100 8500000

35864054

Narragansett Electric

Please use reverse side for comments or corrections and enter a check mark here

Amount Paid
(If different from above)

\$98859.20

8
16

3

CITY OF PROVIDENCE
FINANCE OFFICE
CITY
PROVIDENCE RI 02903

RA

449601008500000 0035864054

See reverse side for explanation of Customer Rights

Right To Dispute Your Bill And To An Impartial Hearing

If you believe your bill is inaccurate or for any reason payment may be withheld, you should first contact our Customer Service Department at our toll free number shown on the reverse side. If a mutually satisfactory settlement of this matter cannot be made, you have the right to submit this matter to: Reviewing Officer, Division of Public Utilities and Carriers, 100 Orange Street, Providence, Rhode Island 02903, Telephone: 277-2443. The Narragansett Electric Company will not disconnect your service pending proceedings before a reviewing officer appointed by the Public Utilities Administrator.

Right To Electric Service During Serious Illness

If you or anyone presently and normally living in your home is SERIOUSLY ILL, we will not discontinue your electric service during such illness providing you have a registered physician certify in writing to us that such illness exists, the nature and duration of the illness. This certification must be received within seven (7) days from the date that your physician initially contacts our Credit Department at our toll free number shown on the reverse side.

Termination of Service to Elderly or Handicapped Persons

If all residents in your household are 65 years of age or older or if any resident in your household is handicapped, the Company will not terminate your service for failure to pay the past due bill without written approval from the Division of Public Utilities. If you cannot pay your bill all at once, you may be able to work out a payment plan with the Company. The Elderly or Handicapped Forms that must be filled out are available at the Company. The Form also enables you to participate in "Third Party Notification". If you have any questions or want further information, call the Credit Department at our toll free number shown on the reverse side.

My comments _____

DEPT. OF CITY CLERK
PROVIDENCE, R.I.

Acct. No. JUN 9 3 24 PM '86

Name _____

FILED

THE NARRAGANSETT ELECTRIC COMPANY
LIGHTING ACTIVITY AND BILLING DETAIL

ACCOUNT NUMBER		CUSTOMER NAME			SERVICE COMMUNITY		RATE	BILLING MONTH	PAGE
49-60100-85000-0		CITY OF PROVIDENCE			PROVIDENCE		S07	MAY	1986 1
CODE	NUMBER OF LIGHTS	LUMEN SIZE	DESCRIPTION		IN OPERATION	ANNUAL CHARGE	DAILY/MONTHLY CHARGE	TOTAL	
			TYPE	POLE					
003X	INSTL ORDER	4000 87123	MERCURY VAPOR LINTON	NO CHARGE ST	0003-00	ALL NIGH 36 DAYS	@ .1341 DATE 04-26-86	4.83	
005H	REMOV ORDER	22000 87176	MERCURY VAPOR EXCHANGE	METAL ST	0042-00	ALL NIGH 45 DAYS	@ .3390 DATE 04-17-86	15.26CR	
007X	REMOV ORDER	30000 87177	SODIUM VAPOR SMITH	NO CHARGE ST	0014-00	ALL NIGH 33 DAYS	@ .3146 DATE 04-29-86	10.38CR	
006H	REMOV ORDER	63000 87174	MERCURY VAPOR KENNEDY	METAL PL	0008-00	ALL NIGH 45 DAYS	@ .5947 DATE 04-17-86	26.76CR	
						TOTAL ACTIVITY	FOR MONTH	47.57CR	

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ACCOUNT NUMBER		CUSTOMER NAME		SERVICE COMMUNITY		RATE	BILLING MONTH	PAGE
49-60100-85000-0		CITY OF PROVIDENCE		PROVIDENCE		S07	MAY	1986 2
CODE	NUMBER OF LIGHTS	LUMEN SIZE	DESCRIPTION		IN OPERATION	ANNUAL CHARGE	DAILY/MONTHLY CHARGE	TOTAL
			TYPE	POLE				
010G	1	1000	INCANDESCENT	METAL	ALL NIGHT	41.52	3.4600	3.46
050H	11	1000	INCANDESCENT	METAL	ALL NIGHT	40.68	3.3900	37.29
003B	1	4000	MERCURY VAPOR	WOOD	ALL NIGHT	70.68	5.8900	5.89
003H	25	4000	MERCURY VAPOR	METAL	ALL NIGHT	70.68	5.8900	147.25
003X	8501	4000	MERCURY VAPOR	NO CHARGE	ALL NIGHT	48.96	4.0800	34,684.08
003D	1	4000	MERCURY VAPOR	RUSTIC	ALL NIGHT	70.68	5.8900	5.89
004A	2	8000	MERCURY VAPOR	WOOD	ALL NIGHT	81.60	6.8000	13.60
004D	182	8000	MERCURY VAPOR	RUSTIC	ALL NIGHT	81.60	6.8000	1,237.60
004G	3	8000	MERCURY VAPOR	METAL	ALL NIGHT	81.60	6.8000	20.40
004H	130	8000	MERCURY VAPOR	METAL	ALL NIGHT	81.60	6.8000	884.00
004X	2271	8000	MERCURY VAPOR	NO CHARGE	ALL NIGHT	59.88	4.9900	11,332.29
034H	1	10000	INCANDESCENT	METAL	ALL NIGHT	166.32	13.8600	13.86

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ACCOUNT NUMBER		CUSTOMER NAME		SERVICE COMMUNITY		RATE	BILLING MONTH	PAGE
49-60100-85000-0		CITY OF PROVIDENCE		PROVIDENCE		S07	MAY	1986 3
CODE	NUMBER OF LIGHTS	LUMEN SIZE	DESCRIPTION		IN OPERATION	ANNUAL CHARGE	DAILY/MONTHLY CHARGE	TOTAL
			TYPE	POLE				
044X	31	10000		NO CHARGE	ALL NIGHT	66.48	5.5400	171.74
017H	226	15000	MERCURY VAPOR	METAL	ALL NIGHT	104.52	8.7100	1,968.46
017X	155	15000	MERCURY VAPOR	NO CHARGE	ALL NIGHT	82.80	6.9000	1,069.50
064H	31	21000		METAL	ALL NIGHT	144.24	12.0200	372.62
073H	3	21000		METAL	ALL NIGHT	225.72	18.8100	56.43
005H	819	22000	MERCURY VAPOR	METAL	ALL NIGHT	123.72	10.3100	8,443.89
005X	1853	22000	MERCURY VAPOR	NO CHARGE	ALL NIGHT	102.00	8.5000	15,750.50
005B	1	22000	MERCURY VAPOR	WOOD	ALL NIGHT	123.72	10.3100	10.31
007H	326	30000	SODIUM VAPOR	METAL	ALL NIGHT	136.56	11.3800	3,709.88
007X	951	30000	SODIUM VAPOR	NO CHARGE	ALL NIGHT	114.84	9.5700	9,101.07
043H	14	30000		METAL	ALL NIGHT	207.36	17.2800	241.92
075H	6	30000		METAL	ALL NIGHT	251.40	20.9500	125.70

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ACCOUNT NUMBER			CUSTOMER NAME		SERVICE COMMUNITY		RATE	BILLING MONTH	PAGE
49-60100-85000-0			CITY OF PROVIDENCE		PROVIDENCE		S07	MAY	1986 4
CODE	NUMBER OF LIGHTS	LUMEN SIZE	DESCRIPTION		IN OPERATION	ANNUAL CHARGE	DAILY/MONTHLY CHARGE	TOTAL	
			TYPE	POLE					
075X	6	30000		NO CHARGE	ALL NIGHT	229.68	19.1400	114.84	
008H	2	50000	SODIUM VAPOR	METAL	ALL NIGHT	157.56	13.1300	26.26	
008X	2	50000	SODIUM VAPOR	NO CHARGE	ALL NIGHT	135.84	11.3200	22.64	
025X	5	50000	SODIUM VAPOR	NO CHARGE	ALL NIGHT	183.00	15.2500	76.25	
067H	2	60000		METAL	ALL NIGHT	206.22	17.1850	34.37	
006H	171	63000	MERCURY VAPOR	METAL	ALL NIGHT	217.08	18.0900	3,093.39	
							MONTHLY CHARGES	92,775.38	
							MONTHLY ACTIVITY	47.57CR	
							TOTAL	92,727.81	
<p>L AMOUNTS ON DETAIL ARE BASE RATES ONLY. SEE ACTUAL BILL FOR "INTEREST CHARGE" ARREARS, IF APPLICABLE. "SALES TAX", IF APPLICABLE, IS INCLUDED IN LIGHTING AMOUNT.</p>									

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