

Supplier EDI Trading Partner Worksheet

Supplier Name: _____

Date Submitted: _____

	Test	Production
Duns Number		
Asset ID Number		
NEPOOL Effective Date		
Common Code		
ISA Address (identifier)		
ISA Qualifier (2 digits only)		
GS Address (identifier)		
Company		
Address		
Customer Service Tel # <small>(to appear on bill if consolidated billing)</small>		
WEB Address		
Business Contact		
Phone		
Fax		
Email		
Utility Testing Contact		
Phone		
Fax		
Email		
EDI Contact		
Phone		
Email		
Segment Terminator		
Element Separator		
Sub-Element Separator		
VAN Name & Mailbox #		

Public Service Company of New Hampshire (d/b/a Eversource) default setting for Control # checking is Not Turned On.

Should control # checking be turned on? NO _____ YES _____