



**Washington 10 Storage Corporation
Infield Transfer Request Form**

Relinquishing Party

Company Name:	
Contract Number:	Transfer Quantity: Dth
Requested Transfer Date _____ / _____ / 200_____	
Signature:	Date:
Print Name:	
Phone No: ()	Fax No: ()

Acquiring Party

Company Name:	
Contract Number:	
Signature:	Date: _____
Print Name:	
Phone No: ()	Fax No: ()

Washington 10 Storage Corporation

ACCEPTED

REJECTED REASON(S): _____

Signature:	Date:
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Instructions: Complete this form and FAX to:
 Mark Bering, Director, Marketing & Optimization, DTE Gas Storage Company
 Phone: (313) 235-6531 FAX: (313) 235-6450