

**SMELL GAS? 1-866-763-5427**

**For inquiries:** 1-855-311-2522

**Email:** lba@enbridge.com

**Make Payments to:** PO Box 680 Scarborough, ON M1K 0A6

**Enbridge Gas Inc.**

Cigna Company.  
53 torrance apt

**Service Address**

53 torrance apt

**LBA Account Number**

47-450 501-29

**Bill Date**

2020-12-10

**Bill Number**

9650573



**WHAT DO I OWE?**

**Billing Period**

Oct 03, 2020 - Nov 02, 2020

**Total Amount**

\$4880

(Taxes Included)



**Charges for Natural Gas**

• See page 2 for details •



**HOW MUCH GAS DID I USE?**

**Meter Reading**

**Instrument Number:** 28097

**Actual:** 17046

**Previous:** 48406

**You used**

91095m<sup>3</sup>

**This cost you**

\$4880

\* HST Registration Number: 105205140 RT0001

- Enbridge Gas charges are to be paid by the Due Date, which is considered to be twenty days after the Bill Date, or within such other time period as set out in the Service Contract. A late payment charge will be applied on any amount not received by the Due Date, which is the twentieth (20th) day following the Bill Date. Interest will be charged at the rate of 1.5% per month (19.56% effectively per annum) until receipt of all of the unpaid Enbridge Gas charges, including all applicable federal and provincial taxes.

- E. & O. E.