

**NEW YORK STATE  
DEPARTMENT OF PUBLIC SERVICE  
STATEMENT OF GROSS INTRASTATE OPERATING REVENUES**

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**UTILITY NAME and ADDRESS**

I hereby certify that the amount shown below is the **NEW YORK STATE** gross **Intrastate** operating revenues of this utility for the period reported.

**Calendar Year 2024**    \$ \_\_\_\_\_

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_____ (Name-Signature)	_____ (Date)
_____ (Name-Print)	_____ (Telephone No.)
_____ (Title)	_____ (Email Address)

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_____ Notary Public	_____ Federal ID Number
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Please return this form by **MARCH 31, 2025**

Electronic filing of the New York State Statement of Intrastate Operating Revenue form is strongly encouraged. The completed form should be filed electronically through the Department of Public Service's Document and Matter Management System (DMM) by choosing Matter Number 25-00028.<sup>1</sup>

If your company does not have the capability to e-file the form, please contact our Central Files Office at 518-474-2500, or email [Secretary@dps.ny.gov](mailto:Secretary@dps.ny.gov) for further guidance.

If the Intrastate Revenue Form contains confidential information, please follow the instructions provided here: <https://dps.ny.gov/filing-documents-secretary>.

Failure to comply with this request could result in penalties as provided in Public Service Law, Section 95.

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<sup>1</sup> To register with DMM, go to <https://dps.ny.gov/dmm-login-document-and-matter-management-system>.