



**Public Service
of New Hampshire**

PSNH Energy Park
780 North Commercial Street, Manchester, NH 03101

Public Service Company of New Hampshire
P.O. Box 330
Manchester, NH 03105-0330
(603) 634-2236
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macdojm@psnh.com

D27265

Sept. 22, 2008

Mr. Robert Scott, Director
Air Resources Division
NH Department of Environmental Services
P.O. Box 95, 29 Hazen Drive
Concord, NH 03302-0095

The Northeast Utilities System

John M. MacDonald
Vice President - Energy Delivery and Generation

Dear Mr. Scott:

PSNH Registration Form for CO₂
CO₂ Allowance Tracking System

Public Service Company of New Hampshire (PSNH) submits the attached registration form as required by Env-A4604 Authorized Account Representative For CO₂ Budget Sources, for the following individuals:

John MacDonald Authorized Account Representative (AAR)
William Smagula Alternate Authorized Account Representative (AAAR)

I am authorized to make this submission on behalf of the owners and operators of the CO₂ budget sources or CO₂ budget units for which the submission is made. I certify under penalty of law that I have personally examined, and am familiar with, the statements and information submitted in this document and all its attachments. Based on my inquiry of those individuals with primary responsibility for obtaining the information, I certify that the statements and information are, to the best of my knowledge and belief, true, accurate, and complete. I am aware that there are significant penalties for submitting false statements and information or omitting required statements and information, including the possibility of fines or imprisonment.

If you have any questions or need additional information, please contact Leo W. Quinn, Jr., Senior Engineer, PSNH Generation at (603) 634-2821.

Very truly yours,

Public Service Company of New Hampshire

John M. MacDonald
Vice President - Energy Delivery and Generation

CC: Joe Fontaine, CO₂ Budget Trading Program Manager

Enclosure



Account Certificate of Representation

This form is required to establish an Authorized Account Representative for compliance accounts under the CO₂ Budget Trading Program.



STEP 1

Identify the budget source(s) by plant name and ORISPL code.

Plant Name: Merrimack, Newington and Schiller Station	ORIS Code 2364, 2367 & 8002
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STEP 2

Enter requested information for the Authorized Account Representative (AAR).

Name John M. MacDonald	Vice President-Energy Delivery and Generation
Address 780 North Commercial Street, Manchester, NH 03101	
Phone Number 603-634-2236	Fax Number 603-634-2213
E-mail Address macdojm@nu.com	

STEP 3

Enter requested information for the Alternate Authorized Account Representative, if applicable.

Name William H. Smagula	Director - PSNH Generation
Phone Number 603-634-2851	Fax Number 603-634-2703
E-mail Address smaguwh@nu.com	

STEP 4

Provide the name of every owner and operator of the budget sources at the plant. Identify the budget sources they own and/or operate by CO₂ Budget Unit #.

Name: Public Service Company of New Hampshire Merrimack Station				<input checked="" type="checkbox"/> Owner	<input checked="" type="checkbox"/> Operator
ID# 1	ID# 2	ID#	ID#	ID#	ID#
ID#	ID#	ID#	ID#	ID#	ID#

Name: Public Service Company of New Hampshire Newington Station				<input checked="" type="checkbox"/> Owner	<input checked="" type="checkbox"/> Operator
ID# 1	ID#	ID#	ID#	ID#	ID#
ID#	ID#	ID#	ID#	ID#	ID#

Name: Public Service Company of New Hampshire Schiller Station				<input checked="" type="checkbox"/> Owner	<input checked="" type="checkbox"/> Operator
ID# 4	ID# 6	ID#	ID#	ID#	ID#
ID#	ID#	ID#	ID#	ID#	ID#

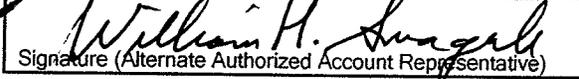
Merrimack, Newington and Schiller Station

Plant Name (from Step 1)

Account Certificate of
Representation - Page 2**STEP 5****Read the certification,
sign and date.**

I certify that I was selected as the CO₂ authorized account representative or alternate CO₂ authorized account representative, as applicable, by an agreement binding on the owners and operators of the CO₂ budget source and each CO₂ budget unit at the source. I certify that I have all the necessary authority to carry out my duties and responsibilities under the CO₂ Budget Trading Program on behalf of the owners and operators of the CO₂ budget source and of each CO₂ budget unit at the source and that each such owner and operator shall be fully bound by my representations, actions, inactions, or submissions and by any decision or order issued to me by the department or a court regarding the source or unit.

I am authorized to make this submission on behalf of the owners and operators of the CO₂ budget sources or CO₂ budget units for which the submission is made. I certify under penalty of law that I have personally examined, and am familiar with, the statements and information submitted in this document and all its attachments. Based on my inquiry of those individuals with primary responsibility for obtaining the information, I certify that the statements and information are to the best of my knowledge and belief true, accurate, and complete. I am aware that there are significant penalties for submitting false statements and information or omitting required statements and information, including the possibility of fine or imprisonment.

 Signature (Authorized Account Representative)	9/22/08 Date
 Signature (Alternate Authorized Account Representative)	9/22/08 Date

Mailing Instructions

Mail this form to the Department at the following address:

New Hampshire Dept. of Environmental Services
Air Resources Div.P.O. Box 95, 29 Hazen Drive
Concord, NH 03302-0095Attn: Joe Fontaine, CO₂ Budget Trading Program Manager
Phone: 603-271-6794