



250 SW Taylor Street  
Portland, OR 97204

503-226-4211  
nwnatural.com

January 30, 2024

***VIA ELECTRONIC FILING***

Public Utility Commission of Oregon  
Attn: Filing Center  
201 High Street SE, Suite 100  
Post Office Box 1088  
Salem, Oregon 97308-1088

**Re: UG 490 - NW Natural's Request for a General Rate Revision  
Signatory Pages to Modified Protective Order No. 23-480**

Attached for filing in the above-referenced docket are Northwest Natural Gas Company's, dba NW Natural, signatory pages to Modified Protective Order No. 23-480 for Eric Nelsen and Zachary Kravitz.

If you have any questions, please let me know.

Sincerely,

NW NATURAL

*/s/ Erica Lee-Pella*

Erica Lee-Pella  
Rates & Regulatory Specialist

Enclosures

**APPENDIX B  
CONSENT TO BE BOUND - SSI  
DOCKET UG 490**

**I. Consent to be Bound - SSI:**

The Modified Protective Order and this Appendix B govern the use of SSI in UG 490.

NW Natural (Party) agrees to be bound by the terms of the Modified Protective Order, certifies that it has an interest in UG 490 that is not adequately represented by other parties to the proceeding, and that the persons listed below are SSI Qualified Persons under Paragraph 10.

Signature: Eric W. Nelsen

Printed Name: Eric W. Nelsen

Date: January 30, 2024

**II. Persons Qualified under Paragraph 10:**

NW Natural (Party) identifies the following person(s) qualified under Paragraph 10.

PRINTED NAME	DATE
Eric W. Nelsen	1/30/2024

**APPENDIX C  
CONSENT TO BE BOUND – HIGHLY CONFIDENTIAL INFORMATION  
DOCKET UG 490**

**I. Consent to be Bound – Highly Confidential Information:**

The Modified Protective Order and this Appendix C govern the use of Highly Confidential Information in UG 490.

NW Natural \_\_\_\_\_ (Party) agrees to be bound by the terms of the Modified Protective Order and certifies that it has an interest in UG 490 that is not adequately represented by other parties to the proceeding.

Signature: Eric W. Nelsen

Printed Name: Eric W. Nelsen

Date: January 30, 2024

**II. Persons Qualified under Paragraph 27:**

I have read the Modified Protective Order and agree to be bound by its terms.

I certify that:

1. I agree to keep the information in a secure manner as required by Paragraph 30-32 and to destroy it at the conclusion of this proceeding as required by Paragraph 33.
2. I understand that ORS 756.990(2) allows the Commission to impose monetary sanctions if a party subject to the jurisdiction of the Commission violates an order of the Commission.
3. The party with which I am associated has a legitimate and non-competitive need for the Highly Confidential Information and not simply a general interest in the information.

By: Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Printed Name: \_\_\_\_\_

Address: \_\_\_\_\_

Employer: \_\_\_\_\_

Job Title: \_\_\_\_\_

By: Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Printed Name: \_\_\_\_\_

Address: \_\_\_\_\_

Employer: \_\_\_\_\_

Job Title: \_\_\_\_\_

By: Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Printed Name: \_\_\_\_\_

Address: \_\_\_\_\_

Employer: \_\_\_\_\_

Job Title: \_\_\_\_\_

By: Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Printed Name: \_\_\_\_\_

Address: \_\_\_\_\_

Employer: \_\_\_\_\_

Job Title: \_\_\_\_\_

By: Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Printed Name: \_\_\_\_\_

Address: \_\_\_\_\_

Employer: \_\_\_\_\_


Job Title: \_\_\_\_\_

**APPENDIX D  
QUALIFICATION OF OTHER PERSONS TO RECEIVE HIGHLY CONFIDENTIAL  
INFORMATION  
DOCKET NO. UG 490**

**I. Persons Seeking Qualification to receive Highly Confidential Information under Paragraph 28:**

I have read the Modified Protective Order and agree to be bound by its terms. I certify that:

1. I agree to keep the information in a secure manner as required by Paragraph 30-32 and to destroy it at the conclusion of this proceeding as required by Paragraph 33.
2. I understand that ORS 756.990(2) allows the Commission to impose monetary sanctions if a party subject to the jurisdiction of the Commission violates an order of the Commission.
3. The party with which I am associated has a legitimate and non-competitive need for the Highly Confidential Information and not simply a general interest in the information.
4. I require access to the following specific Highly Confidential Information (describe with particularity) for the following reason(s) (attach pages if necessary):

By: Signature:  Date: 1/30/2024

Printed Name: Zachary Kravitz

Address: 250 SW Taylor Street, Portland, OR 97204

Employer: NW Natural

Job Title: Vice President, Rates & Regulatory

If not an employee of a party, describe practice and clients: