



NW Natural®

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May 25, 2023

NWN OPUC Advice No. 23-04

VIA ELECTRONIC FILING

Public Utility Commission of Oregon
Attn: Filing Center
201 High Street SE, Suite 100
P.O. Box 1088
Salem, OR 97308-1088

Re: Schedule 400 – Smart Energy™ Program – Renewable Natural Gas Option

Northwest Natural Gas Company, dba NW Natural (“NW Natural” or “Company”), files herewith its Notice of Use of General Protective Order No. 23-132 to facilitate review of protected information in this docket.

Please address correspondence on this matter to me with copies to the following:

eFiling
NW Natural
Rates & Regulatory Affairs
250 SW Taylor Street
Portland, OR 97204
Phone: (503) 610-7330
eFiling@nwnatural.com

Respectfully submitted,

/s/ Ryan Sigurdson

Ryan Sigurdson
OSB# 201722
Regulatory Attorney
Northwest Natural Gas Company
250 SW Taylor Street
Portland, Oregon 97204
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Enclosures

**BEFORE THE PUBLIC UTILITY COMMISSION
OF OREGON**

ADV 1502

In the Matter of

NORTHWEST NATURAL GAS
COMPANY dba NW Natural,

NW Natural's Advice No. 23-04,
Schedule 400 Smart Energy Program,
Renewable Gas Option.

**NOTICE OF USE OF GENERAL
PROTECTIVE ORDER**

1 Northwest Natural Gas Company, dba NW Natural (“NW Natural” or
2 “Company”), hereby provides notice that it anticipates designating information to be
3 produced or used in this docket as protected under the Commission's General
4 Protective Order, No. 23-132 (GPO). The protected information is the exact
5 amounts of Smart Energy’s administrative and marketing costs, which the Oregon
6 Citizens’ Utility Board asked for through a recent data request. Public disclosure of
7 this information would materially harm both the Company and its customers because
8 the Company uses a third-party for marketing and periodically conducts requests-
9 for-proposals (RFP) for these activities. If these amounts became publicly known,
10 competitors may not offer their lowest price for these services. NW Natural may also
11 seek protection of additional information as this docket progresses.

12 The GPO is attached to Order No. 23-132 as Appendix A, which is available
13 at: <https://apps.puc.state.or.us/orders/2023ords/23-132.pdf>. Other parties to the
14 proceeding may seek access to the protected information under the terms of the
15 GPO using the attached signatory pages, pre-marked for use in this docket. The
16 individuals listed in the table below are employees of NW Natural and are identified

1 for purposes of accessing information designed as protected by NW Natural within
2 the docket. NW Natural will provide updates to this table during the course of the
3 proceeding to ensure that it accurately identifies the employees who should have
4 access. NW Natural includes a generic email address (eFiling@nwnatural.com) for
5 purposes of sending and receiving protected information, which can only be
6 accessed by those individuals listed below.

PRINTED NAME	EMAIL ADDRESS	DATE
Radiyah Gaines	Radiyah.Gaines@nwnatural.com	5/25/23
Brian Harney	Brian.Harney@nwnatural.com	5/25/23
Erica-Lee Pella	Erica.Lee-Pella@nwnatural.com	5/25/23
Eric Nelsen	Eric.Nelsen@nwnatural.com	5/25/23
Anne-Marie Puustinen	Anne-Marie.Puustinen@nwnatural.com	5/25/23
Ryan Sigurdson	Ryan.Sigurdson@nwnatural.com	5/25/23
Natasha Siores	Natasha.Siores@nwnatural.com	5/25/23

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8 Respectfully submitted this 25th day of May, 2023.

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NW NATURAL

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/s/ Ryan Sigurdson

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Ryan Sigurdson

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OSB# 201722

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Regulatory Attorney

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Northwest Natural Gas Company

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250 SW Taylor Street

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Portland, Oregon 97204

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Email: ryan.sigurdson@nwnatural.com

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Phone: (503) 610-7570

CONSENT TO BE BOUND
QUALIFICATIONS OF COUNSEL AND OREGON CITIZENS' UTILITY BOARD
ADV 1502

I. Eligibility

Under paragraph 10, persons qualified under the Commission's general protective order upon a party signing this Appendix are:

- a. Counsel for the party;
- b. Any person employed directly by counsel of record; and
- c. Any employee of the Regulatory Division at the Oregon Citizens' Utility Board.

A party must identify all Qualified Persons in section III below when consenting to be bound by the order, and must update this list throughout the proceeding to ensure it accurately identifies Qualified Persons.

II. Consent to be Bound:

The general protective order governs the use of Protected Information in these proceedings. Without the written permission of the designating party, any Qualified Person given access to Protected Information under this order may not use or disclose Protected Information for any purpose other than participating in these proceedings.

_____ (Party) agrees to be bound by the terms of the general protective order, Order No. 23-132, and certifies that it has an interest in these proceedings that is not adequately represented by other parties to the proceedings.

Signature: _____

Printed Name: _____

Date: _____

III. Additional Persons Qualified under Paragraph 10:

_____ (Party) identifies the following person(s) as qualified under paragraph 12. The party's signatory, as identified immediately above, is a Qualified Person under paragraph 10 without also being listed separately below.

PRINTED NAME	DATE

QUALIFICATIONS OF OTHER PERSONS

ADV 1502

I. Eligibility

Under paragraph 11, a party may seek to qualify persons other than those eligible under Appendix B (i.e., paragraph 10) to access Protected Information by having those persons complete and sign this appendix. The signed appendix must be, submitted to the Commission and all parties. After a five-day waiting period, if no party has objected, the persons identified below will be considered Qualified Persons.

II. Consent to be Bound

The general protective order governs the use of Protected Information in these proceedings. Without the written permission of the designating party, any Qualified Person given access to Protected Information under this order may not use or disclose Protected Information for any purpose other than participating in these proceedings.

I have read the terms of the general protective order, Order No. 23-132, and agree to be bound by the terms of the order and provide the following information.

Signature:		Date:
Printed Name:		
Physical Address:		
Email Address:		
Employer:		
Associated Party:		
Job Title:		

<p>If not employee of party, description of practice and clients:</p>	
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