FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

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| Section 16. Form 4 or Form 5 |
| obligations may continue. See |
| Instruction 1(h) |

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934 or Section 30(h) of the Investment Company Act of 1940

| 1. Name and Address of Reporting Person* | | | | | | | | | | | | | | 5. Relationship of Reporting Person(s) to Issuer (Check all applicable) | | | | | | |
|---|---|--|--|------------|---|---|--|-----------------------------------|--|--------|--|--|---------------------------|--|----------------------------|---|------------------------|--|---------------------------------------|--|
| VAN RIPER DANIEL S | | | | | | | | | | | | | | | Director | | | 10% Ow | | |
| (Last) (First) (Middle) 57 FOREMOST MOUNTAIN RD. | | | | | 3. Date of Earliest Transaction (Month/Day/Year) 05/03/2004 | | | | | | | | | | Officer (give title below) | | Other (specification) | | pecify | |
| (Street) MONTVIL | Street) MONTVILLE NJ 07045 | | | | 4. If | 4. If Amendment, Date of Original Filed (Month/Day/Year) | | | | | | | | Individual or Joint/Group Filing (Check Applicable Line) X Form filed by One Reporting Person Form filed by More than One Reporting Person | | | | | | |
| (City) | (Stat | e) (2 | Zip) | | | | | | | | | | | - | | | | | | |
| | | Tal | ole I - Nor | n-Deriv | vativ | e Se | curities | Acq | uired, [| Disp | osed of | , or Ben | eficial | ly O | wned | | | | | |
| 1. Title of Security (Instr. 3) 2. Trans. Date (Month/I | | | | /Day/Year) | | 2A. Deemed Execution Date, if any (Month/Day/Yea | | Transaction Disposed Code (Instr. | | | es Acquired (A) or Of (D) (Instr. 3, 4 an | | | | Form | | Direct Indirect Er. 4) | 7. Nature of Indirect Beneficial Ownership (Instr. 4) | | |
| | | | | | | | | Code | v | Amount | unt (A) or (D) | | - 1 | Transactior (Instr. 3 and | | | | (11341.4) | | |
| | | | Table II - | | | | urities A s, warraı | | | | | | | Ow | ned | | | | | |
| 1. Title of Derivative Security (Instr. 3) | 2. Conversion or Exercise Price of Derivative Security | 3. Transaction Date (Month/Day/Year) | 3A. Deemed Execution D if any (Month/Day/ | Date, T | 4. Transaction Code (Instr. 8) | | 5. Number of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4 and 5) | | 6. Date Exercisable and Expiration Date (Month/Day/Year) | | | 7. Title and Amount of Securities Underlying Derivati Security (Instr. 3 an 4) | | Derivative ative Security | | 9. Number derivative Securitie Beneficia Owned Following Reported | e s ally g | 10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4) | Beneficial Ownership (Instr. 4) | |
| | | | | | Code | v | (A) | (D) | Date Exercisable | | Expiration Date | Title | Amoun Number Shares | rof | | Transaction(s) (Instr. 4) | | | | |
| Directors Deferred Compensation Stock Units ⁽¹⁾ | \$89.23 ⁽²⁾ | 05/03/2004 | | | A | | 22.414 ⁽¹⁾ | | (3) | | (3) | Class A and Class B Common Stock | 22.414 | 4(1) | \$89.23 ⁽²⁾ | 1,002.9 | 911 | D | | |

Explanation of Responses:

- 1. Equal number of shares of Class A and Class B Common Stock credited as units under Hubbell's Deferred Compensation Plan for Directors.
- 2. Unit price consisting of the closing price of one share each of Class A and Class B Common Stock.
- 3. Deferred units are payable commencing on the January 1 following the reporting person's retirement or separation from the Board.

Remarks:

Richard W. Davies Attorney-infact for Daniel S. Van Riper

05/05/2004

** Signature of Reporting Person

Date

Reminder: Report on a separate line for each class of securities beneficially owned directly or indirectly.

- * If the form is filed by more than one reporting person, see Instruction 4 (b)(v).
- ** Intentional misstatements or omissions of facts constitute Federal Criminal Violations See 18 U.S.C. 1001 and 15 U.S.C. 78ff(a).

Note: File three copies of this Form, one of which must be manually signed. If space is insufficient, see Instruction 6 for procedure.

Persons who respond to the collection of information contained in this form are not required to respond unless the form displays a currently valid OMB Number.