

APPLICATION FOR SERVICE: REQUEST FOR NEW OR MODIFIED DELIVERY MEASUREMENT FACILITY

Complete this form to request delivery service on the Canadian Mainline System that requires new delivery facilities or modifications to existing delivery stations.

APPLICATION DATE _____

CUSTOMER INFORMATION

Company Name	
Address	
Telephone No.	
Fax No.	

	Technical Contact Information	Commercial / Other Contact Information
Contact Name		
Telephone No.		
Email Address		

DELIVERY INFORMATION

Delivery Station Information

Requested In-Service Date: _____

Type of Request (please indicate an “x”)

- New Delivery Station
- Existing Station – Capacity Expansion at the existing station
- Existing Station - Other Modifications * at the existing station

* Other Modifications refers to non-capacity related modifications; for example, a request for telemetry information

If New Station Request:

Preferred location (location description; attach map if available):

If Existing Station Request:Delivery Station name and/or description of location: _____

Downstream Gas Usage (check, and indicate %)

 ___% Residential / Commercial ___% Storage ___% IndustrialIf Industrial, check all that apply: Electric Power Generation Cogeneration Petrochemical Feedstock or Fuel Ethanol Other _____Alternate fuel Switchability? Yes No

If “Yes”, alternate fuel type: _____

Requested Operating Pressure _____ kPa

Minimum Acceptable Pressure _____ kPa

Connecting Pipe: Licensed MOP _____ kPa

NOTE:Please complete the information in **Appendix A: – Three Year Volume Projection for New or Modified Meter Station.****APPLICATION SUBMITTED BY:**

Name (print): _____

Position: _____

Telephone: _____

Fax: _____

Signature: _____

