
NGTL Intra-Alberta FT-D Service Offering – Initial Service Offering (ISO) Request Form
Please download and complete the PDF using a compatible application to ensure all fields work properly.

For ISO details that pertain to this form, please refer to the Customer Express Posting

Customer Information

- 1) Company Legal Name*: _____
(“Prospective Customer”)
- 2) Contact Name*: _____
- 3) Telephone Number*: _____
- 4) Email Address*: _____

Service Offering Information for FT-D3

- 5) Requested Contract Demand (GJ/d)*: _____
- 6) Requested Minimum Contract Demand (GJ/d)*: _____ (note: NGTL will not pro-ration service requests below Requested Minimum Contract Demand)
- 7) Preferred Targeted Service Commencement Date (select one)*:
 - November 1, 2030
 - April 1, 2031
 - April 1, 2032

Note: Please specify the preferred targeted service commencement date. If an allocated amount cannot be fulfilled in the Tranche corresponding to the preferred service commencement date, a portion or the full amount of the allocated service may be assigned to another Tranche.

- 8) Term: 15 years
- 9) Deposit Amount*: \$ _____ (CDN)

Location Information

- 10) End User Facility Legal Location*: _____
- 11) Requested Type of Delivery Point Connectivity*^a:

Note: NGTL has sole discretion on the type of connectivity.

- Existing.** If existing, please specify the existing meter station name and number*:

Note: If request is at an existing meter station, the requested service type must match the existing service type at the station.

OR

- New.** If new, please specify preferred tie-in legal location (adjacent to NGTL/ATCO ROW)*:

Note: This location will be taken into consideration but is not guaranteed.

- 12) Planned facility minimum operating pressure: _____

Note: As set out in the Tariff, NGTL does not have an obligation to provide a minimum delivery pressure.

13) Minimum Flow (GJ/d): _____

14) Downstream Gas Usage:

Industrial

Power

Residential/Commercial

Other: _____

Customer Legal Name*:

By: _____
(signature)*

(name)*

(title)*

By: _____
(signature)

(name)

(title)

Notes:

*Indicates a mandatory field. If a mandatory field is not filled out, the request will be deemed rejected.

^aOnly one Delivery Point can be submitted per request form.