



1. Project/Company Name _____
 Project Address: _____

 Type of Business: _____ Hours of Operation: _____
Gas Need Date _____ **Anticipated Site Ready Date** _____
2. Building square footage _____ Required Delivery Pressure _____
3. Square footage of building heated by natural gas _____
4. Contact Information: Name: _____
 Address: _____

 E-Mail: _____
 Phone: _____

<u>Gas Equipment</u>	<u># of Units</u>	<u>Connected BTU/hr</u>	<u>Total BTU/hr</u>
<u>Existing Gas Equipment:</u>			
<i>Example: Rooftop Units</i>	4	100,000	400,000
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
<u>Water Heat:</u>			
_____	_____	_____	_____
_____	_____	_____	_____
<u>New Gas Equipment (to be added):</u>			
<i>Example: Heat Treat Oven</i>	1	5,000,000	5,000,000
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
<u>Gas Equipment Being Removed:</u>			
_____	_____	_____	_____
_____	_____	_____	_____
		Total Load	_____

Additional Information: