



Natural Gas Notification #: \_\_\_\_\_

# NYSEG Nonresidential Natural Gas Service Request Form

## CUSTOMER INFORMATION

Name \_\_\_\_\_

Address \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ ZIP \_\_\_\_\_

Telephone \_\_\_\_\_

## PROJECT LOCATION > If different from address above

Address \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ ZIP \_\_\_\_\_

## PROJECT INFORMATION

**Request type:**  New Service     Relocation     Temporary Service

**Customer type:**  Commercial     Industrial     Municipal

**Building type:**  New Construction     Addition     Existing    Square Feet \_\_\_\_\_

**Is a an HVAC contractor, engineering firm or general contractor involved in this project?**  Yes (please provide information below)     No

HVAC Contractor \_\_\_\_\_ Telephone \_\_\_\_\_

Address \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ ZIP \_\_\_\_\_

Engineering Firm \_\_\_\_\_ Telephone \_\_\_\_\_

Address \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ ZIP \_\_\_\_\_

General Contractor \_\_\_\_\_ Telephone \_\_\_\_\_

Address \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ ZIP \_\_\_\_\_

## PLANS > Required for new construction and additions

**Please attach the following construction blueprints if available:** site utility plan, site grading plan, floor plan and elevations. Show desired service location on site utility plan.

*continued ...*

**METER DELIVERY PRESSURE REQUESTED**

Standard (7 inches water column)  Elevated (14 inches water column)\*  Elevated pressure\* \_\_\_\_\_ w.c. or \_\_\_\_\_ psi

If elevated pressure is requested, please explain why. \_\_\_\_\_

**Underground fuel line:**  Yes (contact NYSEG for requirements)  No

METER NUMBER	STORE/SUITE IDENTIFIER*	TOTAL Btu/hr
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____

\*Fuel lines must be labeled with this identifier if more than one.

**NATURAL GAS EQUIPMENT** > Please itemize the input British thermal units (Btu) for each appliance.

> SPACE HEATING	EXISTING (If applicable)	NEW	TOTAL Btu/hr
Furnaces	____ Quantity _____ Btu/hr	____ Quantity _____ Btu/hr	_____
Boilers	____ Quantity _____ Btu/hr	____ Quantity _____ Btu/hr	_____
Unit Heaters	____ Quantity _____ Btu/hr	____ Quantity _____ Btu/hr	_____
Roof Top Units	____ Quantity _____ Btu/hr	____ Quantity _____ Btu/hr	_____
Other _____	____ Quantity _____ Btu/hr	____ Quantity _____ Btu/hr	_____
Other _____	____ Quantity _____ Btu/hr	____ Quantity _____ Btu/hr	_____
> PROCESS	EXISTING (If applicable)	NEW	TOTAL Btu/hr
_____	____ Quantity _____ Btu/hr	____ Quantity _____ Btu/hr	_____
_____	____ Quantity _____ Btu/hr	____ Quantity _____ Btu/hr	_____
_____	____ Quantity _____ Btu/hr	____ Quantity _____ Btu/hr	_____
_____	____ Quantity _____ Btu/hr	____ Quantity _____ Btu/hr	_____
> COOKING	EXISTING (If applicable)	NEW	TOTAL Btu/hr
Ranges	____ Quantity _____ Btu/hr	____ Quantity _____ Btu/hr	_____
Ovens	____ Quantity _____ Btu/hr	____ Quantity _____ Btu/hr	_____
Fryer	____ Quantity _____ Btu/hr	____ Quantity _____ Btu/hr	_____
Broiler	____ Quantity _____ Btu/hr	____ Quantity _____ Btu/hr	_____
Other _____	____ Quantity _____ Btu/hr	____ Quantity _____ Btu/hr	_____

continued ...

**NATURAL GAS EQUIPMENT (continued)** > Please itemize the input British thermal units (Btu) for each appliance.

> OTHER	EXISTING (If applicable)	NEW	TOTAL Btu/hr
Water Heaters (with tank)	___ Quantity _____ Btu/hr	___ Quantity _____ Btu/hr	_____
Tankless Water Heaters	___ Quantity _____ Btu/hr	___ Quantity _____ Btu/hr	_____
Emergency Generator	___ Quantity _____ Btu/hr	___ Quantity _____ Btu/hr	_____
Other _____	___ Quantity _____ Btu/hr	___ Quantity _____ Btu/hr	_____
Other _____	___ Quantity _____ Btu/hr	___ Quantity _____ Btu/hr	_____
<b>&gt; TOTAL CONNECTED Btu/hr</b>			_____

Submitted by (Signature) \_\_\_\_\_

Name (Please print) \_\_\_\_\_ Date \_\_\_\_\_

**All work must be in compliance with the National Fuel Gas Code; the New York State Fuel Gas Code; NYSEG policies; all other applicable federal, state and municipal codes and regulations; and manufacturer's instructions.**

Please email an electronic copy of the signed application to NYSEGSI@nyseg.com or fax to 844.515.1573 or mail to NYSEG, Attn: Energy Service Installation, Customer Relations Center, P.O. Box 5240, Binghamton, NY 13902-5240.