PIEDMONT GAS COMPANY			APPLICATION DATE:	GAS NEEDED BY DATE:
СОМ	MERCIAL & IND	DUSTRIAL REQUEST FOR NATURAL GAS SERVICE		
SERVICE ADDR	ESS			
CITY, STATE, ZIP			CONSTRUCTION TYPE (Circle one)	
			NEW CONSTRUCTION	ADDING EQUIPMENT
			RETIE	RELOCATION
			REASON FOR RELOCATION	
MAILING ADDRE	SS		CONVERSION TO NATURAL GAS FROM (Circle one)	
			OIL	PROPANE
CITY, STATE, ZIP			ELECTRIC	OTHER
			_	
APPLICANT'S PI	HONE NUMBER			
			4	
EMAIL ADDRES	S			
		UE NUMBER	_	
SITE CONTACT NAME AND PHONE NUMBER				
Programa (noi) Places sirele and: 4 oz 2 noi 5 noi 10noi Other:				
Pressure (psi) Please circle one: 4 oz. 2 psi 5 psi 10psi Other:				
Please attach a site plan with proposed service line and meter locations				
QUANTITY	Existing, Add or Stub	NATURAL GAS FIRED EQUIPMENT	BTU'S PER UNIT	SUBTOTAL BTU'S
TOTAL BTU				J
This application expires 12 months from the date of receipt. By signing this application, the party below represents that the above information is accurate. The information provided in this document, and the accuracy thereof, is critical to determine the size of the gas service line and metering equipment, and path of installation. The customer shall notify Piedmont Gas Company of any gas load changes prior to the installation and use of future equipment/appliances to avoid additional fees. Piedmont Gas Company reserves the right to designate or approve the location of all metering equipment and gas service lines. Piedmont Gas Company must approve all proposed metering arrangements. It is the sole responsibility of the property owner to mark or otherwise identify any abstructions as soon as practicable and at the latest prior to construction, including, but not limited to all privately owned underground facilities on the property (e.g., sanitary and storm sewers, water lines, electric lines, septic systems, irrigation, invisible fences, geothermal systems, etc.). I understand that this application is a request to obtain natural gas service and it does not guarantee gas availability or service. Signature				
Printed Name			Phone #	

RETURN COMPLETED APPLICATION VIA: FAX: (330) 339-7510

 ${\bf EMAIL: CUSTOMERSERVICE@PIEDGAS.COM}$

MAIL: PIEDMONT GAS COMPANY, 159 STONECREEK ROAD NW, NEW PHILADELPHIA, OH 44663