

## **Energy Costcutters Limited – Gas Connections Form**

Please complete and return this form to your dedicated account manager.

Section 1 - Company Details Company Name:	
Company No. (if applicable):	
Company Registered Address:	
Trading Type (Please tick one of the following): Charity  Sole Trader Partnership	Limited $\square$
Public Sector □ LLP □ Other □ If other, please specify:	
Type of Business (Please tick): Micro □ Macro □	
Business Use:	
Section 2 – Site Contact Details	
Full Contact Name:	
Phone Number:	
Email Address:	
Billing Address:	
Site Access Contact Details (if different from above):	
Section 5 - Gas Supply Details  Work Required (Please tick one of the following): New Meter Agreement and Connection □	Meter Exchange □
Meter Relocation ☐ Meter Removal ☐ Other ☐ If other, please specify:	
New / Existing MPRN (if known):  Existing Meter Serial Number (if applicable):	
Full Supply Address (required):	
Current Gas Provider (if applicable):	
Is the supply part of a group or an individual site (Please tick): Individual $\Box$ Group $\Box$	
Distribution Network Operator (DNO) (if known):	
Section 6 - Additional Gas Supply Details	
Meter Size Required (Please tick): U6 ☐ U16 ☐ U25 ☐ U40 ☐ U65 ☐ U100 ☐	
Other   If other, please specify:  Metering Pressure Required (Please tick): Low   Medium   Intermediate   Inte	
Estimated Total Annual Consumption (KWH):	
Peak Hourly Load (KWH):	
Site Completion Date (Ready to accept metering):	
Meter Installation Date Required (Site works must be completed):	
Installations required in the proposal (Please tick applicable boxes): Meter   Data Logger   Data Lo	☐ Kiosk ☐
Chatterbox □	
Meter Position/Location (Please tick): Internal □ External □ Please specify:	
Any Phone Signal/Connection Issues (Please tick): Yes $\square$ No $\square$	
If yes, please provide details –	

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Addi	itional Information:	
IMPOF	RTANT – Please note for any Gas connection requests, we will require the following –	
•	Copies of documents from the Network Operator.	
•	Photos of the main incoming gas service, pipework, and its surroundings	
•	Photo of any meters already on site	
•	A property plan indicating the areas where the supply or meters will be installed.	
•	Proof of the site address registered with the local council or Royal Mail.	
you do indicat Royal I	lition to this form, please provide any documents received from the network operator regarding your supply not have any supply details from the network operator and need a new meter number created, please te this in the 'Additional Information' box. Your supply address must be registered with the local council of Mail. As part of the process, we also require a valid signed Letter of Authority, which your dedicated accorder can send.	or
Failure	e to provide any of the above will lead to rejection of the request.	
Custor	mer Name:	
Custor	mer Signature:	
Date S	Signed:	