<u>UIP QUOTATION/REQUEST & DESIGN NOTIFICATION FORM (CONN_FM138)</u>

All the information in this form supplied by the individual, firm, company to Wales & West Utilites is confidential to that individual, firm or company and MUST NOT be disclosed to any other person, including any person employed in Wales & West Utilites Service Provider, without the consent of that individual

For the attention of Date of Request			Wales & West Utilities Your Ref. No			
Has an Enquiry Form be	en submit	tted for this site previously?	If yes, Wales & West Utilities Ref No			
Enquiring Company Nar Contact Name	me		GIRS REGISTRATION SCOLE.			
Address			CONFIRM COMPANY NAME FOR THE FOLLOWING REGISTRATION SCOPES;			
Post Code Telephone No. Fax No. Internal Control Field			Design			
Is request on behalf of an i	ndividual	customer owner or occupier?	Yes / No, if yes provide customer details in section E.			
Proposed Site Information	<u>on</u>					
Site Name			Tel No			
D . G . I			O.S.Map. No (e.g. TA 1232 NE)			
Single or Multiple Premise	es?					
Type of works (delete as ru Type of Development (del		New Supply / Alterat irred) Domestic / Commerc				
A) Proposed Load						
	lrop at pea drop at pe	kmbarg akmbarg (wher	Max Annual Consumption			
B) Connection and/or Se	rvice Disc	onnection Details				
Connection Point Location	1					
Offtake Diameter and Material Length and Diameter of Pipework Termination Point						
			nly load(s), length, pipe size(s), connection size and plan design submission purposes.			
Use of the design tables in	ndicates t	hat there ia a Post-Acceptan	ace review required. Yes / No			
C) The following section	is for Ind	ustrial / Commercial premis	es only;			
For individual loads > 2,19 Is the proposed load reque Is the pressure at the inlet Do you require works to b Do you require additional If yes, specify	96,000 kW sted to be to supply re carried o conditions	The please indicate if Wales & Vales &	(applicable to this project only) Yes / No			

D) The following section is for Domestic premises only;

Type; Private Yes/No Local Authority Yes	es / No Housing Ass	sociation Yes/No	o Mixed Yes/No				
Are there any non-domestic properties (specify Are there any exceptional loads (e.g. swimming							
Developer Details							
Please complete the remainder of the form for							
Properties to be connected and gas usage							
Property Type		d gas usage		Total			
No. of premises							
Central Heating?							
(domestic only) Y/N Estimated Annual							
Consumption (kWh)							
Peak Instantaneous							
Demand (kW)							
Meter Housing							
Property Type: For domestic loads, FL = Flat BU = Bungalow, O = Other (specify)	For non-do	mestic loads plea	se indicate unit num	ibers.			
D = Built In). For non-domestic properties plea							
				C			
Is the development or the load growth phase							
If yes, please provide details (including number	er of proposed conne	ctions, and their a	ssociated load, per	year)			
On multiple developments please indicate the r	number of connection	ns required within	the site on a suitabl	e scale drawing.			
Is growth beyond this site anticipated within If yes, please provide details (including number							
Do you wish to complete the Final Connection	on? Yes/No						
First Gas Date:							
Other Information							
E) Service Alterations and Disconnections of	<u>nly</u>						
Requester Name (ie. Gas Consumer/Supplier)							
Requester Company (if not Gas Consumer)							
Requester Address							
Post Code							
MPRN (where known)							
Attach site plan indicating exact location of wo	orks and point of term	nination.					
Signed Print Nan	me		Position				