

Utility Infrastructure Provider (UIP) ENQUIRY FORM (CONN FM137)

All the information in this form supplied by the individual, firm, company to Wales & West Utilities is confidential to that individual, firm or company and MUST NOT be disclosed to any other person, including any person employed in Wales & West Utilities's connections service provider, without the consent of that individual, firm or company

For the attention of **Wales & West Utilities Network**

Date of Request Return to Requester By.....Your Ref. No.
.....

The request is submitted on behalf of the owner-occupier by the applicant below in the capacity of Shipper / Supplier / GT / Consultant / Owner-occupier / Developer / Utility Infrastructure Provider / Other (Delete as appropriate)

Enquiring Company Name
Contact Name
Address

Post Code
Telephone No. Fax No.
Internal Control Field

Proposed Site Information

Site Contact Site Location Plans Attached: Yes/No
Site Name (ref. of plan required)
Site Address

Post Code O.S.Map. No.(e.g. TA 1232 NE)

Type of works (delete as required) New Supply / Alteration / Information Request / Disconnection Information Request
Type of Development (delete as required) Domestic / Commercial / Industrial

Does the proposed load follow a normal space heating pattern? Yes/No

For industrial/commercial premises indicate the following:

Type of Load (e.g. modulating, constant, process/on-off/CHP)

Is the proposed load requested to be Interruptible?(if not completed assume Firm)

Will a compressor be fitted? : Yes/No

	YEAR 1	YEAR 2	YEAR 3	YEAR 4	YEAR 5	Ultimate load
No. of individual premises						
Maximum Annual Consumption in						
Maximum Instantaneous Rate in kW						
Maximum Instantaneous Rate in m3/hr						

Has the load been diversified Yes/No*..... (* delete as appropriate)

Does your request fall within the parameters of the standard source pressure table? Yes/No

If Yes, do you want to use the standard pressure? Yes/No*

*If No please enclose cheque for £85 plus VAT made payable to 'Wales & West Utilities'. Wales & West Utilities will be unable to process your request unless payment is received.

Anticipated Gas on Date:

For service alterations or disconnections:

MPRN (where known)

Attach site plan indicating exact location of works and point of termination.

Signed Print Name..... Position.....