

## Multi-Family Gas Service Application

For two (2) or more dwelling units within a single structure, e.g. duplexes, triplexes, four-plexes and apartment/condo complexes. This may include one or more structures. A site plan must be submitted with the form in order to be processed

| may include one or more structures. A site plan must be submitted with the form in order to be processed.  PROJECT INFORMATION |  |              |                        |              |          |                    |  |                          |                    |                   |         |              |                  |            |             |
|--|--|--------------|------------------------|--------------|----------|--------------------|--|--------------------------|--------------------|-------------------|---------|--------------|------------------|------------|-------------|
| Project Name   |  |              |                        |              | PROJE    | CT IN              | FO                                     | RMATIC                   | <u>N</u>           |                   |         |              |                  |            |             |
|  |  |              |                        |              |          |                    |  |                          |                    |                   |         |              |                  |            |             |
| Project Address (Parcel Number if Address is not Assigned)   |  |              |                        |              |          |                    | City                                   |                          |                    |                   |         |              | Zipcode          |            |             |
| Company or Individual Responsible for Construction Charges   |  |              |                        |              |          |                    | Contact Name                           |                          |                    |                   |         | Project Role |                  |            |             |
| Billing Address  |  |              |                        |              |          |                    | City                                   |                          |                    |                   | Sta     | ate          | Zipcode          |            |             |
| Phone  |  |              |                        |              |          |                    | Email                                  |                          |                    |                   |         |              |                  |            |             |
| Main Project Contact Project Role  |  |              |                        |              |          |                    | Phone                                  |                          |                    |                   | Ema     | il           |                  |            |             |
| Secondary Project Con  | ible) P  | Project Role |                        |              |          | Phone              |  |                          | Ema                |                   |         | ail          |                  |            |             |
| RESIDENTIAL UNITS SERVICE INFORMATION  |  |              |                        |              |          |                    |  |                          |                    |                   |         |              |                  |            |             |
| Avg. Sg. Footage of Units  |  |              |                        |              |          |                    | nis Zero Lot Line Construction? Yes No |                          |                    |                   |         |              |                  |            |             |
| APPLIANCES   | Please ind   | icate the    | standar                | d pro        | posed na | atural ga          | as us                                  | sage per h               | ome/unit           |                   |         |              |                  |            |             |
| Heating Wa   |  |              |                        | ater Heating |          |                    |  | On Demand Water H        |                    |                   | iting   | ng Cooking   |                  |            |             |
| Fireplace - Heat Rated   |  |              | Fireplace - Decorative |              |          |                    | Clothes Dryer                          |                          |                    |                   |         | Other:       |                  |            |             |
| · · · · · ·  |  |              |                        |              |          |                    |  | low For Each Residential |                    |                   | uilding |              |                  |            |             |
| Building Number  | ·  |              |                        |              |          |                    | g Number                               |                          |                    | ımber d           | of Unit | s            | Number of Meters |            |             |
|  |  |              |                        |              |          |                    |  |                          |                    |                   |         |              |                  |            |             |
|  |  |              |                        |              |          |                    |  |                          |                    |                   |         |              |                  |            |             |
|  |  |              |                        |              |          |                    |  |                          |                    |                   |         |              |                  |            |             |
|  |  |              |                        |              |          |                    |  |                          |                    |                   |         |              |                  |            |             |
|  |  |              |                        |              |          |                    |  |                          |                    |                   |         |              |                  |            |             |
| NON-RES  | IDENTIAL   | BUILDI       | NGS S                  | SER\         | /ICE IN  | NFOR               | MA                                     | TION (I.E                | CLUB               | HOUSI             | E. RE   | C CE         | NTER             | R. POOL    | )           |
| BUILDING 1  Building Type  |  |              |                        |              |          | Addres             |  |                          |                    |                   |         | f Meters     |                  | Total BTUs |             |
| Equipment  | Total BTUs Equipme   |              |                        | ent          |          | Tot                |  | otal BTUs                | tal BTUs   Equipme |                   | ent     |              | Total BTUs       |            |             |
| BUILDING 2 Building Type   |  |              | Service Addres         |              |          |                    | ss                                     |                          |                    | # of M            |         |              | To               | Total BTUs |             |
| Equipment Tota   |  |              | Us Eq                  | uipm         | ent      |                    | Tot                                    |                          | otal BTUs          | al BTUs   Equipme |         | ent          |                  | Total BTUs |             |
| BUILDING 3 Building Type   |  |              |                        | Service      | Addres   | S                  |  |                          | # (                | # of Meters       |         | Total BTUs   |                  |            |             |
| Equipment  | Total BTUs Equipme   |              |                        | ent          |          | Total BTU          |  | otal BTUs                | Equipment          |                   |         | Total BTUs   |                  | otal BTUs  |             |
| Load Information Note:   |  |              |                        |              |          |                    |  |                          |                    |                   |         |              | o roquir         | ad for pro | ioot dooign |
|  | The project manager will provide a customer equipment worksheet as well if your loads are above 1400 CF, this sheet will be required for project design.  Moving Existing Facilities: Will existing gas facilities at the location require relocation? Yes (Mark on Site Plan) |              |                        |              |          |                    |  |                          |                    |                   |         |              |                  |            |             |
| g = 2.15 g   | Moving Existing Facilities: Will existing gas facilities at the location require relocation? Yes (Mark on Site Plan) No  |              |                        |              |          |                    |  |                          |                    |                   |         |              |                  |            |             |
|  |  |              |                        |              |          |                    |  |                          |                    |                   |         |              |                  |            |             |
| I understand this ap   |  |              |                        |              |          |                    |  |                          |                    |                   |         |              |                  |            |             |
| gas installed. If I de   |  |              | ed, a ga               | s con        |          | be sen<br>th gas i | nstal                                  | llation                  | and that ag        | reement           | will be | the off      | ricial no        | uce to pro | cessed      |
| Signature (Typed Signa   | iture is Accept  | able)        |                        |              |          |                    | Da                                     | ate                      |                    |                   |         |              |                  |            |             |

Electronic application submission via the submit button or as an attachment to NewServiceApplications@pse.com is the preferred and most efficient method for application submission. If that is not possible, you may mail or fax your application and site plan.