

CUSTOMER REQUEST FOR A NEW GAS METER – NON DOMESTIC



Details of Applicant		Site Details	
Contact Name		Site Contact	
Organisation		Organisation	
Address		Address	
Address		Address	
Town		Town	
County		County	
Postcode		Postcode	
Telephone		Site Contact Telephone	
Email		Alternative Telephone	
Additional Information			
Gas Supply Connections Ref:		MPRN ref (if known):	
Chosen gas supplier (if known):			
Proposed Meter Position (Delete)	INTERNAL	EXTERNAL	If external, Squire Energy to provide a kiosk? YES NO
<small>(Note: Housings must have a minimum free ventilation area of 3% floor area)</small>			
Customer Supplied Meter Room Dimensions (mm)	LENGTH	WIDTH	HEIGHT
Required gas pressure (at the gas meter inlet valve) in mbar? _____ (Note: The standard inlet pressure at the meter inlet valve is 19 - 21mbar.)			
Gas Load Information			
Unit Name / Number	Maximum hourly flow rate (gas load) - kWh	Minimum hourly flow rate (should not be zero) - kWh	Annual Load kW
Special Load Features			
Please give details of any special features that will be present downstream of the meter (i.e. will boosters, compressors, CHP, pulsating loads, extraneous gases etc be present):			
Ancillary Equipment			
Please indicate if you require Squire Energy to provide any ancillary equipment (i.e. dataloggers, convertors, A.M.R. equipment etc)			
Additional Requirements			
Please indicate any special requirements of the site (i.e. site safe working practices, safety restrictions etc)			
Notes			
Please provide a scaled plan of the site showing the meter position and the location of the incoming gas service. If there are existing gas meters on site, please provide the Meter Point Reference Numbers (MPRN).			