

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

Date of Request:	UIP Reference:
Previous Cadent Reference:	
UIP Name:	
Contact Name: UIP Address:	
OIF Address.	
Postcode:	
UIP Telephone Number: UIP Email Address:	
OIP EIIIdii Address.	
PLEASE CONFIRM COMPANY	GIRS REGISTRATION SCOPE NAME RESPONSIBLE FOR THE FOLLOWING COMPONENTS OF THE PROJECT
	NAME TIEST OF THE POLICY OF THE PROJECT
Design:	
Construction/ Commissioning:	
Project Management:	
Final Connection:	
MOBS	
Do You require Cadent Gas to und	ertake the final connection?
UIP Proposed Site Details	
Proposed Site Name:	
Site Contact: Site Address:	
Site Address.	
Postcode:	
Requested Connection Point Eas	tings: Northings:
Type Of Works:	
SERVICE ALTERATIONS: Where a service a	Iteration results in work being carried out on the existing connection (to the supplying ccordance with the requirements of CAD/SP/NP/14E.
Type of Development:	
Single or Multiple Premises:	
Do you require works to be compl	eted outside normal working hours?

A)

PLEASE ENSURE A SUITABLE SITE PLAN, INDICATING THE EXACT LOCATION OF THE WORKS PROVIDED WITH YOUR APPLICATION. FOR MULTIPLE DEVELOPMENTS PLEASE PROVIDE INFORMATION ON THE NUMBER OF CONNECTIONS REQUIRED.



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B)	Proposed Load Details						
	Max Instantaneous Rate (SHQ): Max Annual Consumption (AQ): Predicted Mains Pressure Drop (Mbar): Predicted Service Pressure Drop (Mbar):						
	Does the proposed load follow a normal space heating pattern: EUC (if known):						
C)	Connection And/or Service Disconnection Details						
	Will the Design contain a Mains Element: Connection Type: Mains Detail (if applicable) (Length & Diameter Material): Service Detail (Length/ Diameter/ material /Termination Point/ Meter housing):						
	(Individual Service Details to be supplied in Section G) Number of Services Easement Required						
	Existing Infrastructure						
	Parent Main: Diameter: Material: Pressure Tier:						
	Service: Diameter: Material: Pressure Tier:						
	The Below Information is for Alterations & Disconnections						
MPRN: Meter Serial No (if known)							
	Alteration/ Disconnection Point: Eastings: Northings: Existing Load Details SHQ:						
	Note: When designed using standard tables in CAD/SP/NP/14E, only load(s), length, pipe size(s), connection, plan showing proposed route and connection point are required for design submission purposes.						
D)	Service Alterations or connections on behalf of Owner/ Occupier (refer to existing document)						
	Connection on behalf of owner/ occupier only:						
	Requestor Name						
	Company/Address/ Postcode						
	Email:						
E)	Industrial/ Commercial Premises Only						
Type of Load							
	Please Note If Your Load Is CHP/ Power Generation/CNG/Booster/Compressor Please Follow the Quotations Process For individual loads > 2,196,000 kWh please state if Cadent Gas is to take ownership of the system						
	*Is The Pressure at The Inlet To Supply Meter Installation Required To Be >20.7Mbarg: If Yes, Specify:						

*Note: Additional Costs May Incur for The Above

*If Yes, Specify:

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*Do You Require Additional conditions or Site Rules & Regulations (applicable to this request only)



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F) Domestic Premises Only

<u>G)</u>

Property Ownership:							
Specify Any Non-Domestic Pren	mises:						
Details of Exceptional Loads (e. swimming pools)	g						
Please Complete the Remain	der of the	Form for Bo	oth Domestic	& Industria	l/ commerc	ial Properties	
		Prope	erties to be Co	nnected & G	as Usage		Total
Consumer Type**							
No. Of Premises/ Unit No's							
Estimated Annual Consumption (kWh)							
Peak Instantaneous Demand (kWh)							
** Domestic/ Industrial/Commercia	il		•		•	<u>'</u>	
Is The Development or The Lo	ad Growth	Phased?					
If Yes, Please Provide Details (Including Number of Proposed Connections & their associated load Per Year):							
•						,	
First Gas Date:							
Additional Information:							

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ACCEPTANCE

Job Title:

A.	Complete	For	UIP	Self	connection	Only
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A. Complete For OIP Self connection Unity							
operat	rm on behalf of e with a pressure of for the Contract Sum	Mbar , in accordance with the	he proposed connection at the above site will applicable Conditions of Contract (i or ii the appropriate rate).				
condit			Connection works subject to the terms and d Service Alteration Agreement entered				
i. ii.	2,196,000 kWh per annum, Cadent's General Conditions of Contract for a Self-Lay pipe (System) not exceeding 2,196,000 kWh or.						
In add	ition, I acknowledge t	hat the carrying out of the proposed	d Connection will be subject to.				
I. II. III.	the issue by Cadent of an Authorisation. the submission to and approval by Cadent of a Routine or Non-Routine Procedure (if applicable) under Cadent's Safe Control of Operations procedures.						
Wo Site		ated to commence on: ated to be completed by:	Dates Only Accepted Dates Only Accepted				
Sign	ed:						
- 3							
Prin	t Name:						



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B. Complete for final Connection by Cadent Only

Print Name: Job Title:

I confirm on behalf of	(the customer) that the pro	posed connection at t	the above site will			
operate with a pressure	Mbar, and I agree that Cadent Gas v	vill be undertaking th	e Final Connection			
works at a cost of £	(plus VAT charged at the appropriate rate)	subject to either:				
i. Where the cust	omer's request is for connection of single pre	mises consuming no	more than			
2,196,000 kWh exceeding 2,196	per annum, Cadent's General Conditions of C 5,000 kWh or.	ontract for a Self-Lay	pipe (System) not			
	omer's request is for connection of single pre					
•	n or connection of multiple premises irrespec					
Authorisation and Connection Conditions for New Self Lay Pipes above 2,196,000 kWh and Maximum 7 Bar, subject to any express variations or amendments in the Quotation or Authorisation						
(as the case ma	y be).					
I confirm that the ir	nstaller possesses the necessary public & emp	oloyee liability insura	nces.			
Date the Site is antici	pated to be ready for Cadent commence on:		Dates Only Accepted			
Site Contact Name:						
Site Contact Number:						
Signed:						