Land enquiry for an NDM GT connected system exit point

# From GT to Northern Gas Networks

|  |  |  |  |
| --- | --- | --- | --- |
| **GT reference number** |  | **Date of request** |  |
| **GT name** |  | **For the attention of** (Northern Gas Networks) |  |
| **Address** |  | **Northern Gas Networks** |  |
| **GT telephone number** |  |
| **GT contact name** |  | **GT fax number** |  |
| **GT signature** |  | **Job title** |  |

# GT site information

|  |  |  |  |
| --- | --- | --- | --- |
| **CSEP name** |  | **O/S map reference** |  |
| **Site name** |  | **CSEP development period (years)** |  |
| **Street** |  | **CSEP Connection**  **scaled location plan enclosed?** | Yes/No |
| **Town** |  | **Is this the Initial Request?** | Yes/No |
| **County** |  | **If no, existing site works reference number** |  |
| **Postcode** |  |  |  |

|  |  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
| **Load details** | | **EUC01B**  **(Domestic)** | | | **EUC\_\_\_\_\_\*\***  **(Non-domestic)** | | | **Max CSAQ**  **for all EUCs (kWh)** | **Max CSEP Offtake Rate (kWh/h)** |
| Number of NDM conns | CSAQ (kWh) | SHQ (kW) | Number of NDM conns | CSAQ (kWh) | SHQ (kW) |
| **A** | Year 1 |  |  |  |  |  |  |  |  |
| Year 2 |  |  |  |  |  |  |  |  |
| Year 3 |  |  |  |  |  |  |  |  |
| Year 4 |  |  |  |  |  |  |  |  |
| Year 5 |  |  |  |  |  |  |  |  |
| Year 6 |  |  |  |  |  |  |  |  |
| Year 7 |  |  |  |  |  |  |  |  |
| Year 8 |  |  |  |  |  |  |  |  |
| Year 9 |  |  |  |  |  |  |  |  |
| Year 10 |  |  |  |  |  |  |  |  |
| **B** | Maximum potential load, A plus additional Condition 16 | | | | | | | | |
|  | Future |  |  |  |  |  |  |  |  |

\*\*For each EUC the category, number of connections and CSAQ offtake rate must be stated for each year

# For industrial/commercial premises indicate the following:

|  |  |
| --- | --- |
| **Type of Load (e.g. modulating, constant, process/on-off/CHP)** |  |
| **Will a compressor be fitted?** | Yes/No |

|  |  |
| --- | --- |
| **Does your request fall within the parameters of the standard design pressure table in NGN/SP/NP/14/E?** | Yes/No |
| **If Yes, do you want to use the standard design pressure** | Yes/No |
| Please note that if a network analysis service is requested this will be chargeable | |
| If both A and B loads, or only the A load falls within the parameters of the table a single charge will apply | |
| **Anticipated connection date** |  |

|  |  |  |
| --- | --- | --- |
| **Any site anomalies, additional conditions, site rules or regulations?** | |  |
| **Any construction period constraints?** | |  |
| **Any enhanced facilities required?** | |  |
| **Further information may be provided on a separate sheet. Please indicate here if attached:** | |  |
| **Do you wish to complete the final connection?** | | Yes/No |
| **FOR GT FINAL CONNECTIONS ONLY** – Please confirm company name for the following GIRS registration scopes: | | |
| **Design:** |  | |
| **Construction, commissioning, connection (routine):** |  | |
| **Construction, commissioning, connection (non-routine):** |  | |
| **Project management:** |  | |