Application for Gas Service Line Approval

This form to be used when requesting new gas service for any load over 1,000,000 BTU or any service where there is no stub to the property line. Please fill out all applicable information.

Location: Facility Name: ____________________________________________________________
Street Address: ___________________________________________________________________
Applicant: Contact Name: ______________________________________ Phone #: ______________
Plumbing Company: ____________________________________ Phone #: ______________
Mailing Address (inc. zip): ___________________________________________________________________
Email Address: ___________________________________________________________________
License Number: _______________________________________ Fax #: ________________
Facility; Building Square Footage: _______________________
Existing gas load: ______ BTUH or MCFH Proposed gas load ______ BTUH or MCFH

Signature: ___________________________________ Date: ______________________________
Form can not be completed without signature.

NOTE: Please include a site plan with this request.
Send completed request to appropriate Field Engineering Office.

North Work Center
7710 Durant Drive
PO Box 1103, Mail Code 2150
Colorado Springs, CO  80947-2150
(719) 668-4985
FAX (719) 668-4998

South Work Center
1521 Hancock Expressway
PO Box 1103, Mail Code 1821
Colorado Springs, CO  80947-1821
(719) 668-5564
FAX (719) 668-5956

For office use only

Work Order Number(s) _______________________________________
FE: ____________________________ Phone# __________________

Form G-40