

COMMERCIAL APPLICATION

Site plans must be submitted with application. This service installation is governed by the terms in NW Natural's Tariff, available at www.nwnatural.com.

Submitted Date: _____ E-Mail Address: _____ (for Order Confirmation)
 NW Natural Contact: _____

APPLICANT TYPE

<input type="checkbox"/> New Service Line & Meter No current gas service line to structure	<input type="checkbox"/> New Additional Meter Only New meter on existing manifold Green-Tagged <input type="checkbox"/> ID-Tagged <input type="checkbox"/> Address of primary meter: _____	<input type="checkbox"/> Meter Re-Installation Replacement meter only on existing riser or manifold Any New Housepipe? <input type="checkbox"/> Yes <input type="checkbox"/> No
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Job Site Address: _____ City: _____ State: _____
 Project Name: _____ Cross Street: _____

APPLICANT INFORMATION

Applicant must also complete a Business Credit Application.

Responsible Billing Account Holder: _____ Contact Person: _____
 Phone: _____ Email: _____
 Mailing Address: _____ City: _____ State: _____ Zip: _____

CONTRACTOR INFORMATION

Gen Contractor: _____ Email: _____ Phone: _____
 Site Supervisor: _____ Email: _____ Phone: _____
 Project Mgr: _____ Email: _____ Phone: _____
 Mech Contractor: _____ Email: _____ Phone: _____
 Architect/Engineer: _____ Email: _____ Phone: _____

STRUCTURE & EQUIPMENT INFORMATION

Project Type (select one)	<input type="checkbox"/> New Construction (or previously unoccupied space) NW Natural yellow conduit required.#	Square Footage (to be served by this meter): _____ Primary Business Use: _____ (i.e. Multi-family, Warehouse, Office, Retail, Restaurant)
	<input type="checkbox"/> Conversion (previously occupied, no previous gas service)	Number of Units: _____
	<input type="checkbox"/> Existing (previously occupied and previous gas service)	

Meter Pressure: 2 PSI 5 PSI (Requires NW Natural Approval) New Construction ready date: _____
 Meter Location: _____ Distance in feet from Street to Meter: _____
 Will dryout heat be required? Yes No If Yes, total dryout load: _____

Type	Please describe equipment	Quantity	BTU/Hour (per ea. unit)	BTU/Hour Total
Space Heating				
Water Heating				
Cooking				
Other				
Other				
TOTAL				