APPLICATION FOR SERVICE: REQUEST FOR NEW OR MODIFIED <u>DELIVERY</u> MEASUREMENT FACILITY

Complete this form to request <u>delivery</u> service on the Great Lakes Pipeline Canada System that requires new delivery facilities or modifications to existing delivery stations.

APPLICATION DATE: _____

CUSTOMER INFORMATION

Company Name	
Address	
Telephone No.	
Fax No.	

	Marketing Contact Information	Engineering Contact Information	Primary Contact Information
Contact Name			
Telephone No.			
Email Address			

DELIVERY INFORMATION

Part I: Delivery Point Information

Type of Request (please indicate an "x")

New Delivery Station

Existing Station – Capacity Expansion at the existing station

Existing Station - Other Modifications* at the existing station

*Other Modifications refers to non-capacity related modifications; for example, a request for telemetry information

If <u>New</u> Station Request:

Suggested Delivery Station Name:

Preferred New Delivery Station Legal Location (please attach map):

Land Requirement:

Access Conditions:



If <u>Existing</u> Station Request: Delivery Station Name:				
Request for Plant Signals?	Tes Yes	□ No		
Regulatory Approval (specify):	Municipal:			
Dates of approval:		ot yet approved, indicate if application has been		
filed and expected dates of approv	al:			
☐% Industrial Alternate fuel Switchability? □ Y If "Yes" alternate fuel type		 Petrochemical Feedstock or Fuel Ethanol Other 		
Requested Operating Pressure				
Minimum Acceptable Pressure		kPa		
Connecting Pipe: Licensed MOP		kPa		
NOTE: Please complete the information in or Modified Meter Station.	n Appendix A:	– Three Year Volume Projection for New		
AUTHORIZATION INFORMAT	<u>ION</u>			
Authorized By: Name (print):		Telephone:		
Position:		Fax Number:		
Signature:				

APPENDIX A: Three Year Volume Projection for New or Modified Meter Station

Delivery Estimate Nov. 1 - Oct. 31	20 to 20 (GJ/d)	20 to 20 (GJ/d)	20 to 20 (GJ/d)
Max Hour - Winter			
Max Hour - Summer			
Min Hour - Winter			
Min Hour - Summer			
Max Day - Winter			
Max Day - Summer			
Min Day - Winter			
Min Day - Summer			
Annual Volume			

Three year projection of expected volumes (GJ/d)

In the space below, please elaborate on the following and add additional comments or clarifications if required

- a) Incremental daily and annual volumes resulting from this request
- **b**) New market(s) to be served (ie. residential, commercial, industrial)
- c) Requestor's proposed facilities to serve its new market

Additional Comments: