

GTC

GAS METER WORKS REQUEST FORM



Part A - To Be Completed By The Shipper

1. SHIPPER INFORMATION		2. JOB INFORMATION	
Shipper		MPRN	
Contact		Serial No.	
Phone No.		Type of work required	** METER REMOVAL OFMAT TEST
Fax Number		Meter Reading	
Date Requested		Meter Type	Cavity / Semi-submerged
3. JOB ADDRESS & CONTACT DETAILS		4. ALTERNATIVE CONTACT	
Customer Name		Name	
Daytime Tel No.		Property Number	
Evening Tel No.		Property Name	
Property Number		Street Name	
Property Name		Locality/District	
Street Name		Postal Town	
Locality/District		Postcode	
Postal Town		Daytime Tel No.	
Postcode		Evening Tel No.	
5. Party Appointed to Conduct Meter Works			
** GTC (or their agent)/A contractor appointed by the Shipper			
6. Details of Contractor Appointed if other than GTC (GTC reserve the right to demand and see reasonable proof of the contractor's competency, qualifications and quality control system to ensure compliance with the GTC Safety Case before work can commence)			
Contractor Name		Contractor Tel No	
Part B - Acknowledgment of Meter Works Request (To Be Completed GTC)			
Date Received		GTC Quote for Meter Works	£
For the avoidance of doubt, GTC reserve the right to charge the Shipper in accordance with its Metering Charges Statement for abortive visits and where a meter is found to be damaged as opposed to faulty.			
Part C - Acceptance of GTC costs (To be completed by the Shipper)			
We, the Shipper, hereby agree that the above works shall be carried out and also agree to pay GTC the sum quoted above in accordance with the GTC Network Code.		Signed	
		Dated	
Part D - To Be Completed By GTC/Shipper Contractor prior to attendance at site			
1. APPOINTMENT DATE			
2. APPOINTMENT BAND		**AM / PM	
3 WHO WILL ATTEND/REPRESENT CONTRACTED PARTY			
4. CONTRACTED PARTY CONTACT NUMBER			
Part E - To Be Completed by GTC/Shipper Contractor after site visit			
1. Date of Site Visit			
2. Outcome of Site Visit			
3. New/Existing Meter Asset Details	Serial Number		Manufacturer
	Meter Read		Year of Manufacture
	Read Units	**Metric/Imperial	Model i.e. U6
	Meter Type i.e. diaphragm		Measuring Capacity i.e. 6scmh
4. Exchanged/Removed Meter Asset Details	Serial Number		Manufacturer
	Meter Read		Year of Manufacture
	Read Units	**Metric/Imperial	Model i.e. U6
	Meter Type i.e. diaphragm		Measuring Capacity i.e. 6scmh
5. Confirmation of Total Charge to Shipper		£	
** Delete as appropriate			