

ALTERATION TO DOMESTIC GAS SERVICE – Low Pressure

*All fields need to be completed in order for us to issue an accurate quotation
Please allow 8 weeks for work to be completed following payment/returned documentation*

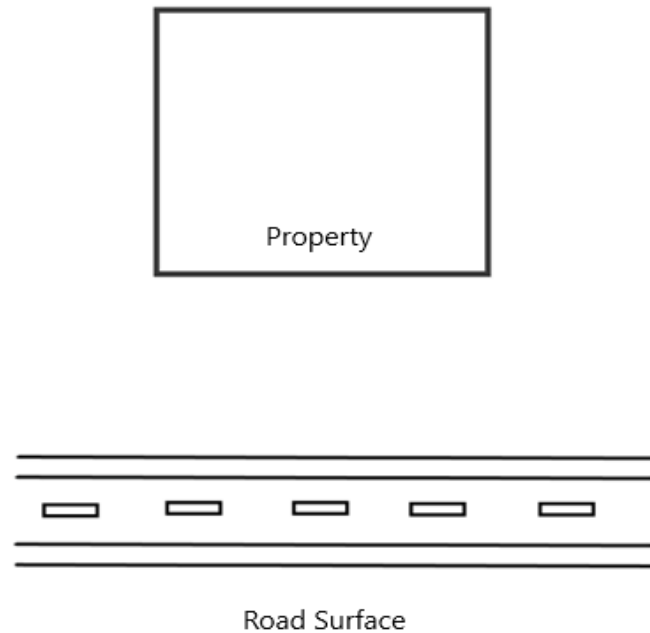


1. Site Details		2. Customer Correspondence Details	
This is the address at which the customer would like the service alteration		This is the address where correspondence will be sent (if different from site address)	
Title:		Title:	
Full Name:		Contact Name:	
Organisation: (if appl)		Organisation: (if appl)	
House Name/Number:		House Name/Number:	
Street Name:		Street Name:	
Postal Town:		Postal Town:	
County:		County:	
Postcode:		Postcode:	
Email address(es):		Email address(es):	
Tel No:		Tel No:	
Tel No:		Tel No:	
Best time to contact:	Morning <input type="checkbox"/> Afternoon <input type="checkbox"/>	Best time to contact:	Morning <input type="checkbox"/> Afternoon <input type="checkbox"/> Anytime <input type="checkbox"/>
3. Property Type		4. Meter Position Details	
What is the type of property? Flat <input type="checkbox"/> Bungalow <input type="checkbox"/> Terraced <input type="checkbox"/> Semi-detached <input type="checkbox"/> Detached <input type="checkbox"/> Other _____		Type of Meter Box (existing)	Meter Serial No:
Number of Bedrooms:		Surface Mounted <input type="checkbox"/> Cavity (built-in) <input type="checkbox"/> Semi-concealed <input type="checkbox"/>	
Is the building Grade listed? Yes <input type="checkbox"/> No <input type="checkbox"/>		Type of Meter Box (required)	
		Surface Mounted <input type="checkbox"/> Cavity (built-in) <input type="checkbox"/> Multi Box <input type="checkbox"/>	
5. Requesters Details		6. On-Site Excavations / Site Considerations	
This section provides GTC with more information about the requester		Will you be performing the excavation/ reinstatement? Yes <input type="checkbox"/> No <input type="checkbox"/>	
In what capacity is the customer acting? Customer <input type="checkbox"/> Contractor <input type="checkbox"/> Letting Agent <input type="checkbox"/> Other <input type="checkbox"/>		Distance from existing meter position to new position: metres/feet	
Registered Disabled? Yes <input type="checkbox"/> No <input type="checkbox"/>		Will the work involve land not in the customer's ownership? Yes <input type="checkbox"/> No <input type="checkbox"/>	
Would the customer like to receive the Quotation by email? Yes <input type="checkbox"/> No <input type="checkbox"/>		Please advise overleaf of any difficulties on site ie. steep steps, access issues, streams etc.	

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Meter Box Relocation Instruction – Using the floor plan below, please identify any doors, windows, drains, vents, electric meter box (meter boxes should be 150mm apart) Please also mark any pathing areas and where possible provide photos of the existing and new meter positions) If the new meter position is at the side of the property, it needs to be a maximum of 2m from the gable end. Please see example on Page 3.

**Please confirm the following:**

- Confirm existing box type and position on the property. Mark with an 'M'
- New box type and position on property. Mark with an 'X'
- Confirm if you will be doing the excavations required to relocate the meter:

(These are: excavation 1.2 metres x 1.2 metres to gain access to the existing service pipe and trenches of 600mm x 600mm wide and deep to the new meter position)

- **Under no circumstances should a PE gas pipe be under any part of a building.**

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Example:

