



NATURAL GAS UTILITY
Safety Compliance and Reliability

Gas Service Change Request Form



Instructions:

Complete form in its entirety — Email Form to enumclawgas@ci.enumclaw.wa.us

The Gas Dept. will return the form to you with their review comments and further instructions.

I am requesting:

Increase of Gas Load
Complete Entire Form

Removal of Gas Service
Complete Section 1 & 3

Service Relocate
Complete Section 1 & 3

If increasing gas load (additional new or higher capacity appliance), a mechanical and/or plumbing permit application may required to be submitted concurrently with this gas change form, please contact the permit department at (360) 825-3593 for instructions.

SECTION 1:

Name _____ E-mail Address _____

Service Address _____ City _____ State _____ Zip _____

Billing Address: _____ City _____ State _____ Zip _____

Phone Home _____ Cell _____

Square Footage of House _____ Mechanical Contractor Name _____

Mech. Contractor Phone: _____ Email: _____

SECTION 2:

Gas Load Input (found on a plate affixed to the appliance, or check with your contractor) Enter the total number of appliances and total BTU input. (necessary for proper meter and service size)

Equipment	New Appliance BTU Input	Existing Appliance BTU Input	# of Units	Equipment	New Appliance BTU Input	Existing Appliance BTU Input	# of Units
Heating				Outdoor Fireplace			
Water Heater				Gas Fireplace			
Range				Generator			
Dryer				Other (specify)			

Total BTU Requested In Home _____

SECTION 3:

Comments:

By signing below, I certify the information I provided is true and correct to the best of my knowledge.

Customer Signature _____ Date _____

Staff Use Only

Customer Account # _____

Meter Size Needed: 250 425 630 1000

Delivery Pressure Required: 7" 2# 5# Length of Service from street to meter location _____

Special Notes:

This quote is valid for 12 months or the next approved fee resolution, from the date of the staff signature, which ever is sooner.

Staff Printed Name _____

Staff Signature _____

Date _____