ELIZABETHTOWN NATURAL GAS DEPARTMENT
301 Waterworks Dr, POST OFFICE BOX 550
ELIZABETHTOWN, KENTUCKY 42702 - 270/765-6121 Ext. 215
kim.bell@elizabethtownky.gov or Fax: 270-737-7167

APPLICATION FOR NATURAL GAS

- INDUSTRIAL OR LARGE COMMERCIAL -

NAME OF COMPANY _____Phone:_____

ADDRESS OF FACILITY REQUIRING GAS _____

SALES CONTRACT DESIRED:
_____ General Rate - Firm
_____ High Load Factor Rate (For less than 100 MCF/day with 50% or greater load factor)
_____ *Industrial Interruptible Rate (priority interruptible)
_____ *Transportation Rate (fully interruptible)

GAS USAGE - indicates amount required for each time interval:

HEATING: _____ BTU/HR _____CU FT/HR _____MCF/DAY _____MCF/YEAR**

PROCESSING: _____ BTU/HR _____CU FT/HR _____MCF/DAY _____MCF/YEAR**

BOILER: _____ BTU/HR _____CU FT/HR _____MCF/DAY _____MCF/YEAR**

SIGNATURE OF APPLICANT _____ TITLE _____

THIS _____ DAY OF _____ 20_____

METERS ARE SIZED FOR 4 OZ (7" WATER COLUMN) PRESSURE. ELEVATED PRESSURE REQUIRES NATURAL GAS DEPARTMENT APPROVAL.

GAS APPLICATION APPROVAL

(FOR OFFICE USE ONLY)

APPROVED _____ YES _____ NO

REMARKS_____

_____

_____

SIGNED BY _____ TITLE _____

THIS _____ DAY OF _____ 20_____

* Must have standby fuel capability and 50% or higher load factor
** 1 MCF = 1000 cubic feet