



Service Address:	Service City:	State:	Zip:
------------------	---------------	--------	------

All above ground, underground and customer-owned facilities must be clearly identified on the property design sketch below:

- |                                 |                                  |  |  |
|---------------------------------|----------------------------------|--|--|
| - Location of natural gas meter | - Wells and Private Water Lines  | - Municipal Sewer or Water Laterals        | - LP Fuel Lines/Tanks w/connecting lines to buildings    |
| - Invisible Fences              | - Underground Sprinkler Systems  | - Septic Systems/Drain Fields              | - External Wood Furnaces w/connecting lines to buildings |
| - Existing Landscaping          | - Planned or Potential Additions | - Air Conditioning Units/Fresh Air Intakes | - Private Underground Wiring or Cable/Satellite TV Lines |
| - Planned Landscaping           | - Other: _____                   |  | - Geothermal heat pumps w/connecting lines to buildings  |

↑  
N

BTU Load: <input type="checkbox"/> < 600,000 <input type="checkbox"/> > 600,000 list total: _____	Will Service Line Cross Septic or Sewer: YES or No (must be on design)
Pipe Density: Medium or High Pipe Diameter: _____	Total Footage: _____ White Flagged: YES or NO If yes, by: _____

**Footage:**

Total Ft:		Ft > 250:		Cost per ft >250 @ :	
-----------	--	-----------	--	----------------------	--

**Estimate of Installation Charges:**

Initial Connection Fee:	\$	Permit Fee:	\$ Will be invoiced
Excess Footage:	\$	Camera Service:	\$ Will be invoiced
Contribution in Aid of Construction:	\$	Other:	\$
Boring/Unusual Construction:	\$	Other:	\$
<b>Total:</b>	<b>\$</b>		

**Payment Must Be Received In Full Prior To Construction:** Paid By Method: \_\_\_\_\_ Amount: \$ \_\_\_\_\_ Received By: \_\_\_\_\_  
 Will pay by credit card in 2 business days. GMG will contact you.  Will mail in payment within 5 business days.

By my signature, I certify that I own or am an authorized representative of the owner of the property for the service address indicated on this form. I have provided the location of all items that are applicable as listed above. I have reviewed and agree with the placement of lines/meter. I furthermore agree to hold Greater Minnesota Gas, Inc. and/or its agents harmless for any damage to private underground facilities that occurs during the installation of natural gas service as a result of failure on my part to ensure that the private underground facilities on this property have been adequately marked and/or exposed prior to construction.

<b>Customer Printed Name:</b>		<b>Daytime Phone:</b>	
<b>Customer Signature:</b>		<b>Date:</b>	
<b>GMG Rep:</b>		<b>Date:</b>	