

Residential Gas Connection Application Form

fax 0800 166 155

post Vector Limited
Private Bag 3022
Hamilton

tel 0800 22 22 60
(07) 847 8144



1. Initiator Details

Date _____ Energy Retailer _____ (must be completed)

Initiator: _____ Fax Number () _____ Phone Number () _____

Note: A Vector gas measurement system (meter) will be installed unless prior notice of alternative supplier is given below.

Alternative gas measurement system supplier _____

2. Date Meter Installation Required (please tick box)

"ASAP", to be actioned within 10 working days from application being logged by Vector.
"TBA", to be actioned within 10 working days from notification of ready status.

ASAP

TBA

Special Requirements _____

3. Installation Site Details

Customer / Builder: _____ Daytime Phone: () _____

Spec Home (please tick box) Yes No

House Number: _____ Lot / DPS Number: _____

Street Address: _____ Town: _____

Builder / Gasfitter Name: _____ Contact Phone: () _____

4. Property Details (please tick box)

New House (when will inbuilt meter box be installed?) Date: _____ Existing House
 Back section Right of Way (Consent required) Cross Lease (consent required)
 Grass Seal

Distance from boundary to meter location _____ metres
Note: First 25 metres free, additional distance will be charged at \$20 / metre inc GST

5. Meter Location Details (Note: Front of house determined by street address that fronts gas main. See diagram overleaf.)

LHS: _____ m RHS: _____ m LH Front: _____ m RH Front: _____ m (distance from corner)

Comments: _____

6. Gas Required For (Including Bayonet Point). Please indicate quantities of each type of appliance in boxes provided.

Storage hot water <input type="checkbox"/>	Continuous flow hot water <input type="checkbox"/>	Dual central heating <input type="checkbox"/>	Does the combined load exceed 400MJ? Yes <input type="checkbox"/> No <input type="checkbox"/>
Flued space heating <input type="checkbox"/>	Flueless space heating <input type="checkbox"/>	Cooking <input type="checkbox"/>	
Pool heating <input type="checkbox"/>	Bayonet point <input type="checkbox"/>	Other (specify) _____	

7. Invoicing Details for Additional Charges

Name: _____

Postal Address: _____

Contact Phone Number(s): () _____

Office Use Only

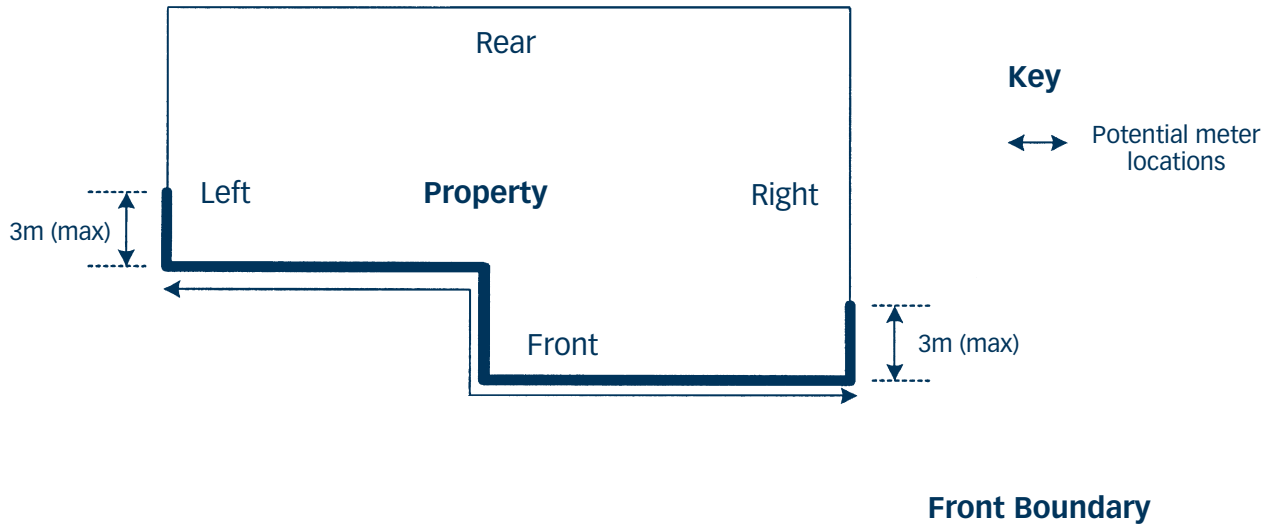
Application Accepted Application Declined Consents Received

ICP number: _____ DB number: _____

Comments: _____

Note: Glossary of terms overleaf.

Meter Location Requirements



Note: The meter is to be located to provide the shortest, most direct route of the gas service pipe (with meter located on front of property or up to a maximum of 3 metres down either side wall). The meter must also be 1 metre away from doors, opening windows and electricity meters. If it is not possible to locate the meter as above please phone 0800 22 22 60

Glossary

"Service"	Installation of gas meter and connection to mains / gas supply at front boundary of site.
"Site"	Street address of property to receive gas connection.
"Energy Retailer"	Name of the Company customer intends to purchase gas from for use at the site. Must be completed in all cases.
"ASAP"	Service will be scheduled for next available construction date (usually within 10 working days of acceptance of application).
"TBA"	To be used if site not ready for service at date of application. Initiator to advise Vector of the date when site will be ready for scheduling service. Vector will endeavour to complete service within 10 working days of notification.
"Customer/Builder"	Customer – Name of resident at site who will be billed by Energy Retailer for gas usage. Builder – Name of builder of site (new home) where "customer" name not known.
"Special Requirements"	Used by initiator of application to comment on any special requirements regarding service. Eg. Specific date, HSE issue, Communication to third parties, open trench available.
"Invoicing Details"	To be completed for invoicing of any additional charges in completing service. Eg. Excess meterage above service length of 25 metres.