

METER RELOCATION APPLICATION FORM FOR RESIDENTIAL AND COMMERCIAL PROPERTIES

This form is to be used where annual gas consumption at supply address is less than ten (10) terajoules.
All sections must be completed. Failure to do so will delay the approval process.

What service do you need?

- Meter Relocation
- Service Relocation
- Meter & Service Relocation

What is your building type?

- Residential
- Commercial

Applicant Information

*Title

*First name

*Surname

*Address

Postcode

ACN/ABN (If applicable)

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Are you the owner of the supply address?

- Yes (Please proceed to Installation Information section)
- No (If no, in what capacity are you making this application *eg. plumber, builder, occupier/tenant?* _____
(Please proceed to Owner Information section))

Owner Information

The 'Owner' is defined as the person who owns the property to which this application applies.

NOTE: The Owner will be responsible for the approval of any charges and subsequent payment of any charges relating to this application.

Owner Name

Title

First name

Surname

Company Name (If applicable)

ACN/ABN (If applicable)

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Telephone

Home

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Work

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Mobile

Email

Installation Information

Address of installation

Postcode

Plumber/gasfitter Details

*First name

*Surname

*Licence Number

*Phone Number

Proposed Meter Location

- Internal
- External

Specific Site Conditions

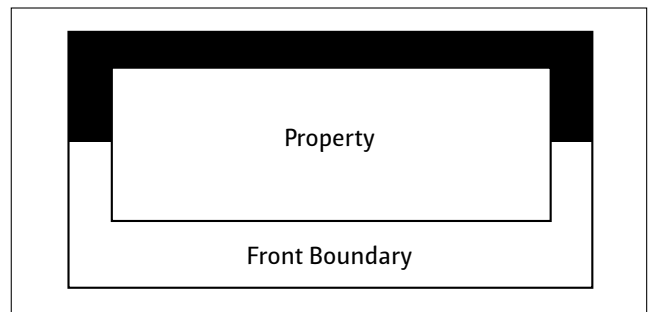
- steep incline/decline
- tiered gardens
- pavers
- rockeries
- concrete
- locked gates
- in ground sprinkler system
- shared driveway
- battle-axe block
- other

Distance from property boundary and meter position

- Under 25 metres
- Over 25 metres

Estimate total metres

Please mark with an X for your preferred meter position on the diagram below. Please note that the meter position can be located between the front boundary and a position no more than 2 metres past the front face of the dwelling (shaded area) and not behind locked gates.



Meter location in words

Acknowledgement and Authority

(please tick each box to indicate consent to the following statements)

- I hereby authorise ActewAGL Retail to submit this meter relocation application to ActewAGL Distribution on my behalf and to obtain a negotiated connection offer (Offer) from ActewAGL Distribution setting out the work to be performed and applicable charges. I understand that the Offer will be based on the information provided in this application and confirm that the information provided in this application is true and correct. I agree to notify ActewAGL Retail if any of the information provided in this application changes.
- I acknowledge that the meter relocation service will be performed by ActewAGL Distribution under the "Terms and conditions for meter relocation services for premises connected to ActewAGL's gas distribution network in ACT and NSW (annual consumption less than ten (10) terajoules) (Terms and Conditions), which is available on our website www.actewagl.com.au
- If I am not the owner of the supply address, I confirm that I am authorised to submit this application on behalf of the owner and that the owner has consented to this application.
- I consent (and if applicable, I confirm that I have obtained the owner's consent) to the collection, use and disclosure of personal information included in this application in accordance with the Terms and Conditions and ActewAGL Retail's Privacy Policy available at: www.actewagl.com.au/Help-and-advice/Legal/Privacy-policy

Name of applicant (please print)

Signature of applicant

Date

What happens next?

Once we have received your completed application, we will send you an Offer setting out the work to be performed and the applicable charges. If you accept the Offer and pay all applicable charges, we'll do our best to work with your gasfitter or plumber to provide the meter relocation service at the agreed time.

Please note: Where you have a current retail gas agreement with a retailer, then under the terms of ActewAGL Distribution's deemed standard connection contract, you are obliged to inform either your retailer or ActewAGL Distribution of any permanent material change to the energy load or pattern of usage at the premises.

Return Details

Name: ActewAGL Gas New Connections
Mailing Address: PO BOX 250 Civic Square ACT 2608

Email: actnewcons@actewagl.com.au
Phone: (02) 6248 3827
Fax: (02) 6248 3055
